

FIGURE 1

149

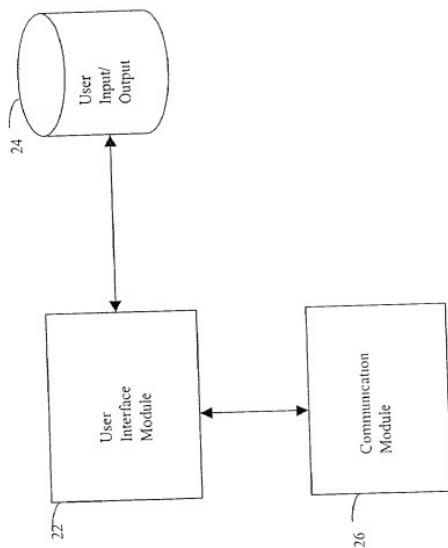


FIGURE 2

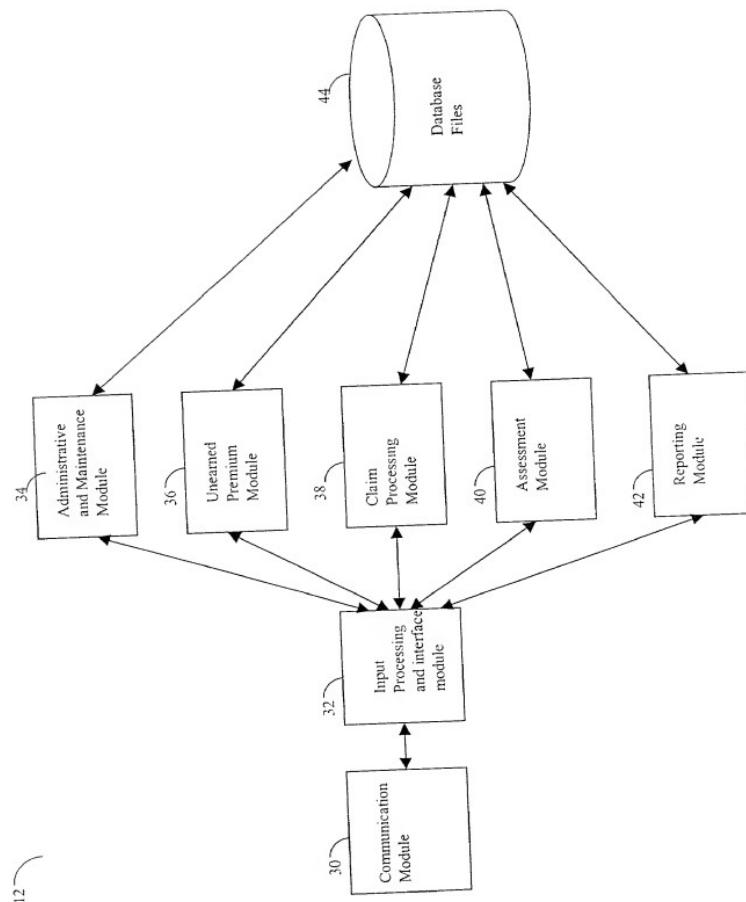


FIGURE 3

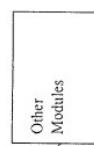
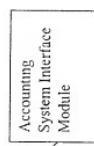
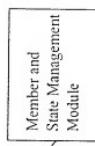
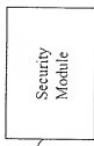


FIGURE 4

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102 Initializing database with scheme member and state information.

104 Insurance company insolvency occurs.

106 Guaranty service assumes active claims of insolvent insurance company. Processing includes initially loading active claims.

108 Insolvency notification procedures are performed.

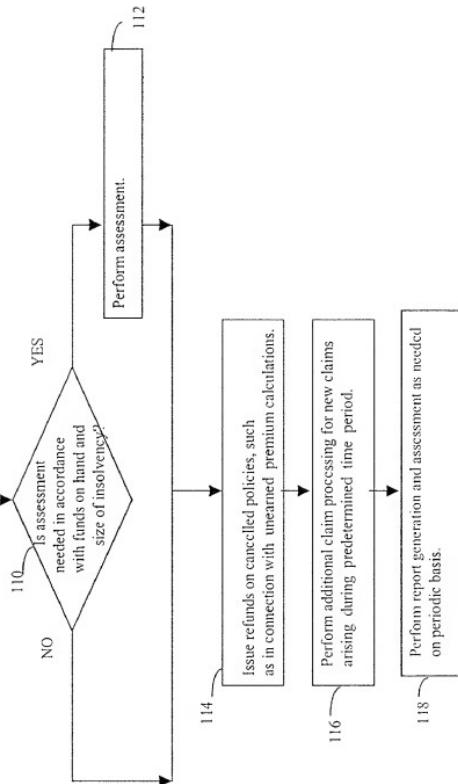
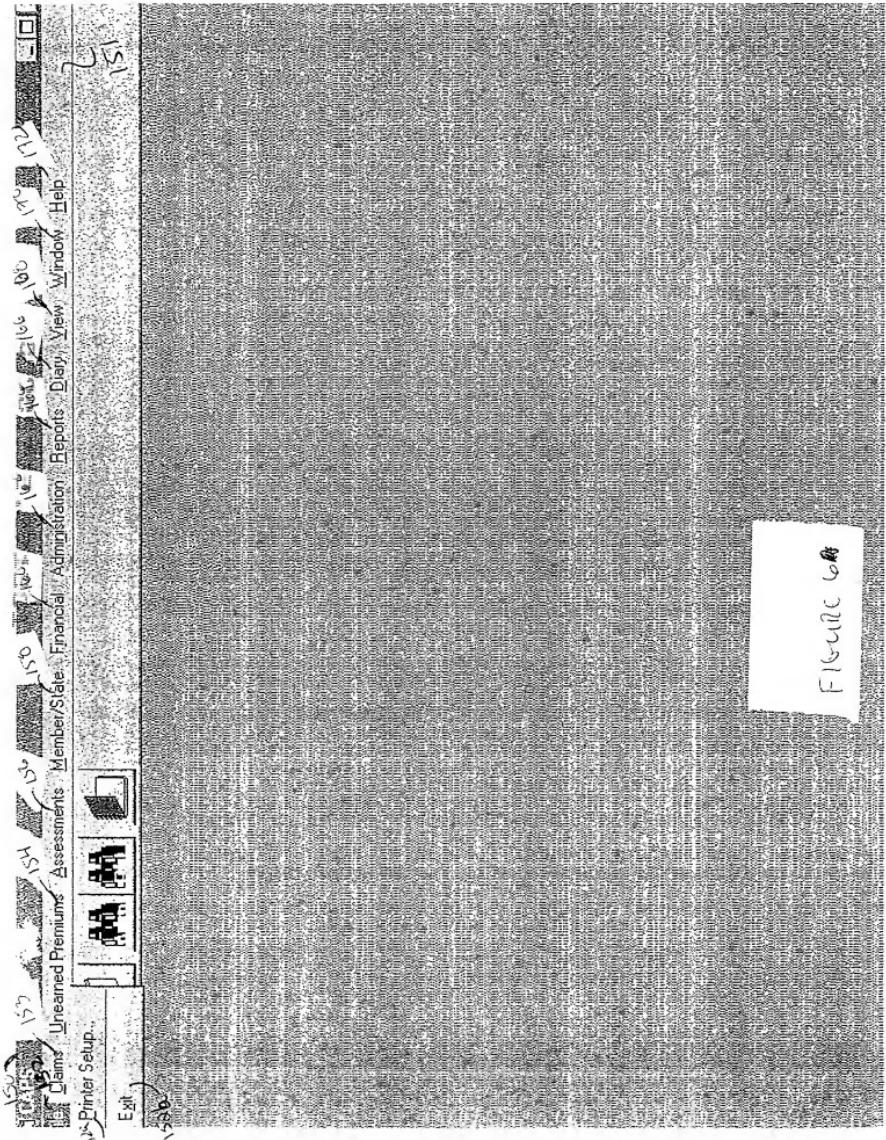
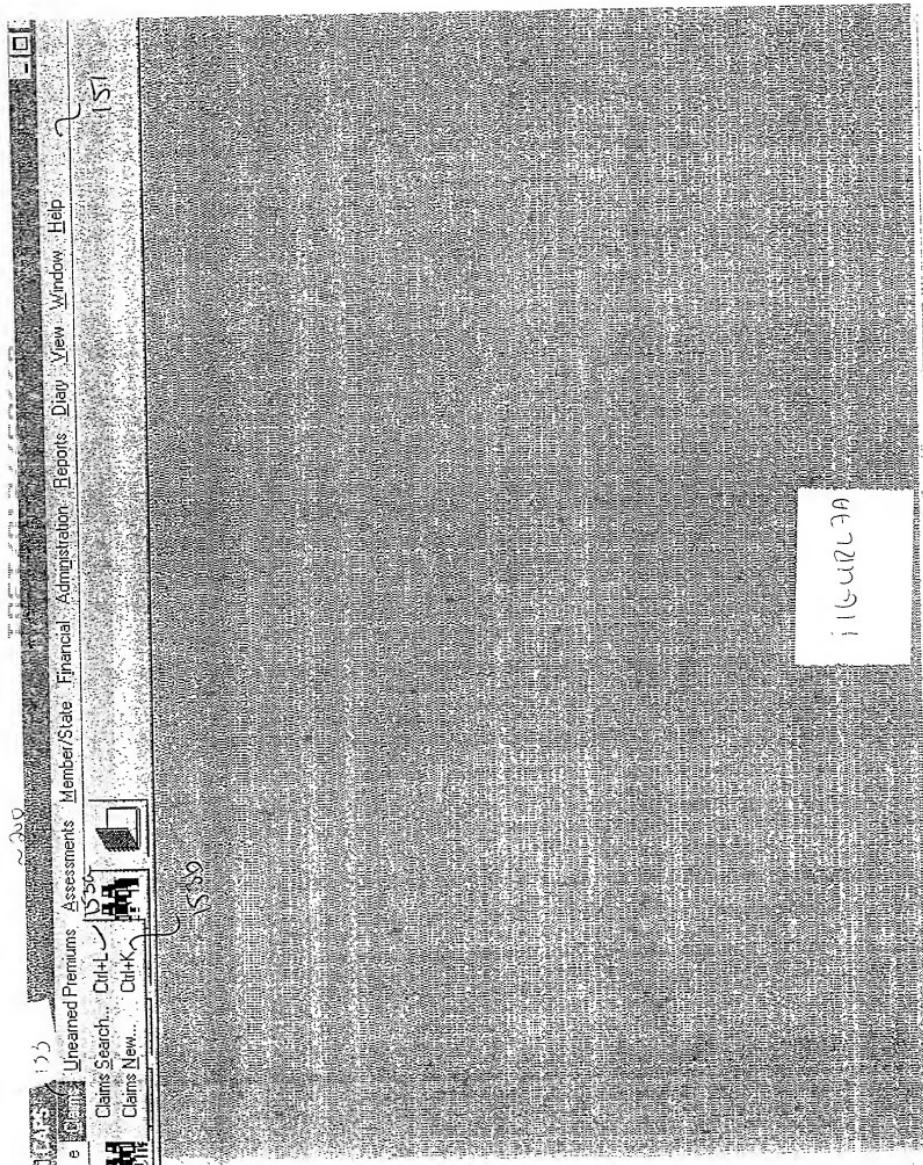


FIGURE 5



11/13/2000 11:35 AM



e-Claims		Unearned Premiums	Assessments	Member/State	Financial	Administration	Reports	Diary	View	Window	Help																																																																																		
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File Claims | Learned Premiums | Assessments | Member/State | Financial | Administration | Reports | Disk | View | Window | Help



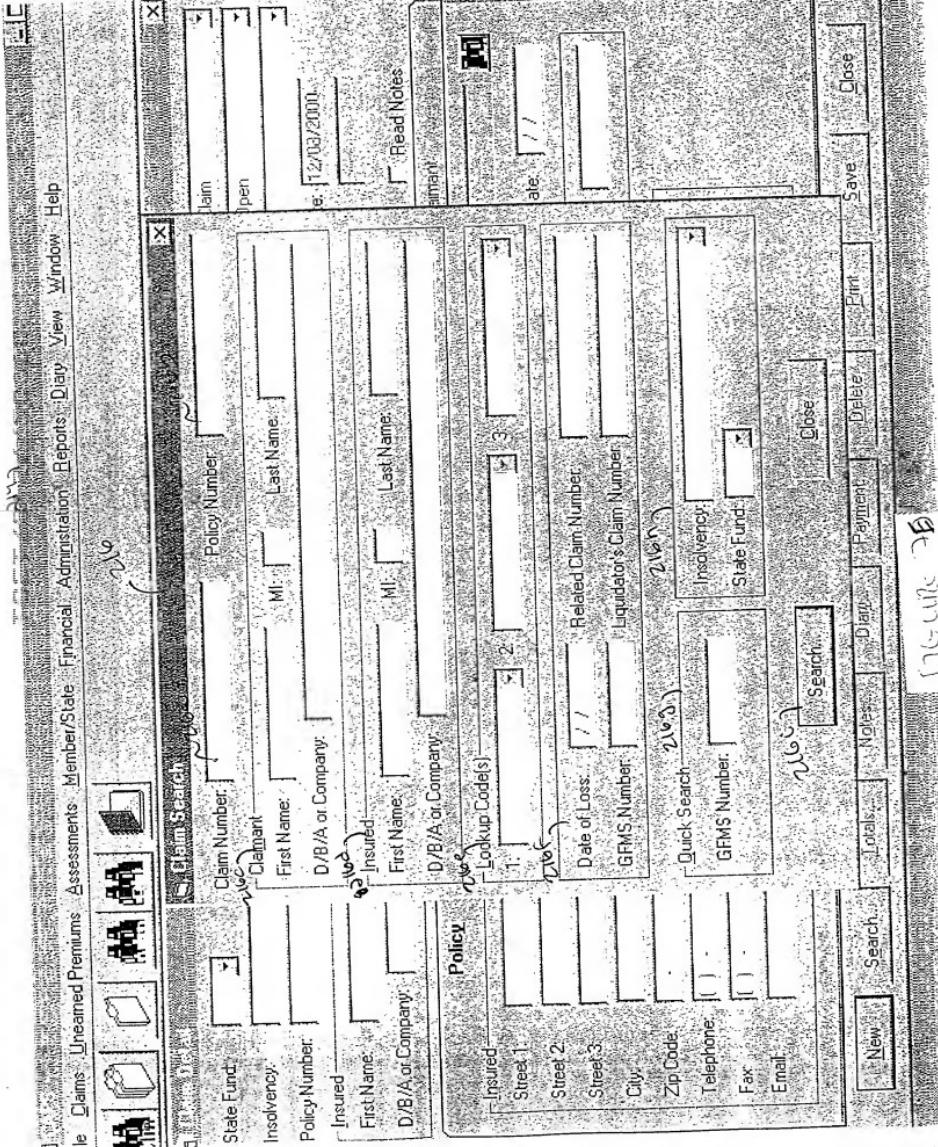
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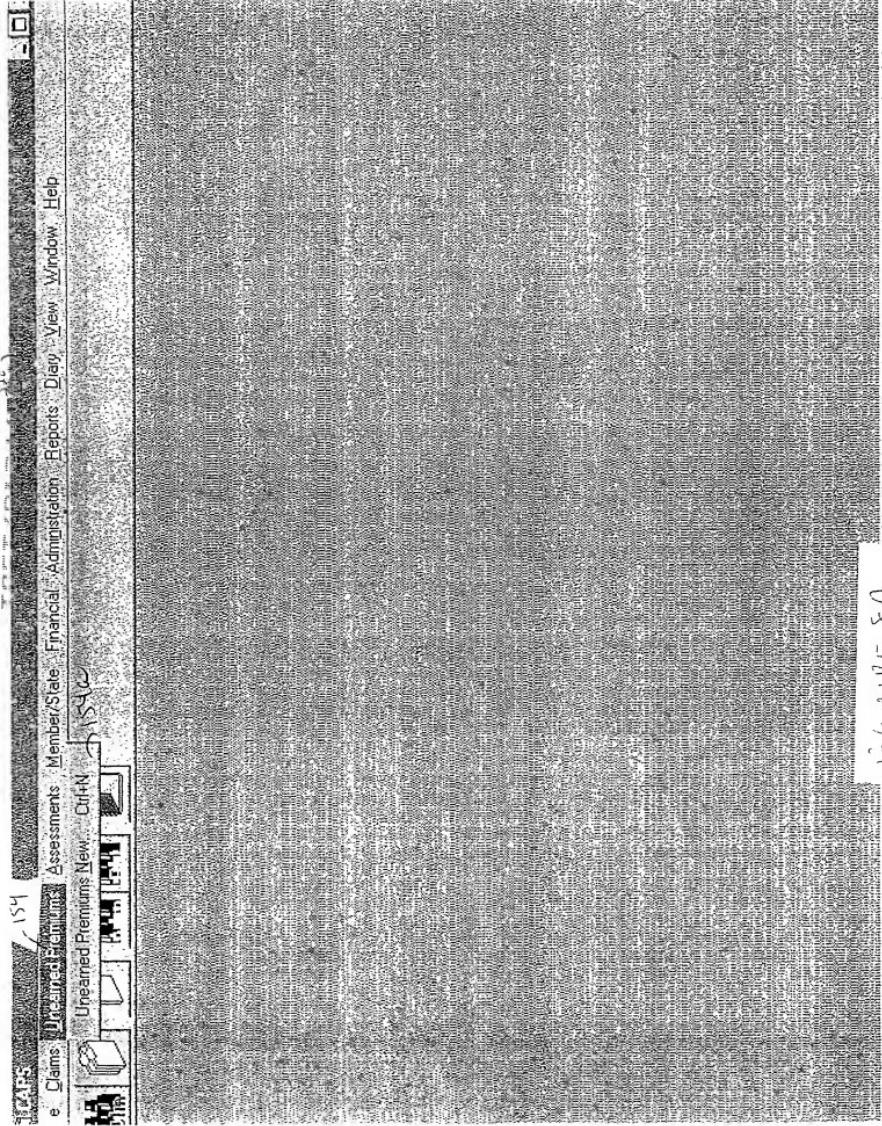
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Issued:	<input type="text"/>	Last Name:	<input type="text"/>	Status Change Date:	<input type="text"/> 12/08/2000
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D/B/A or Company:	<input type="text"/>	Approval ID:	<input type="text"/>	Blocked:	<input type="checkbox"/>
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New | Search

Print

Claim Details																					
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File Claims Unearned Premiums Assessments Member/State Financial Administration Reports Diary View Window Help



Enter Premium Policy Detail

State Fund:

Insolvency:

UP Policy Number:

Insured #1 First Name:

Insured #2 First Name:

Inception Date:

Billing Type:

Agent:

File Location:

Status:

Policy

Policy Information

Termination / /

Date:

Auditable:

UP Handler:

Entered By: JS2_Stadtlander.Jason

File Location: 12/08/2000

Date: 12/08/2000

Status: Status Reason:

Open

New

Search

Print

Delete

Close

Insured	Premium Calculation	Payment History
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Cancellation	/ /
Date:	

Entered By:	JS2_Stadtlander.Jason
File Location:	12/08/2000

Date:	12/08/2000
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Status:	<input type="text"/>
Change Date:	<input type="text"/>

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e Claims Unearned Premiums Assessments Member/Site Financial Administration Reports Dial View Window Help



State Fund:

Insolvency:

UP Policy Number:

Issisted

Insured #1: First Name:

Last Name:

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UP Policy Number:

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Insured #2: First Name:

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X

X

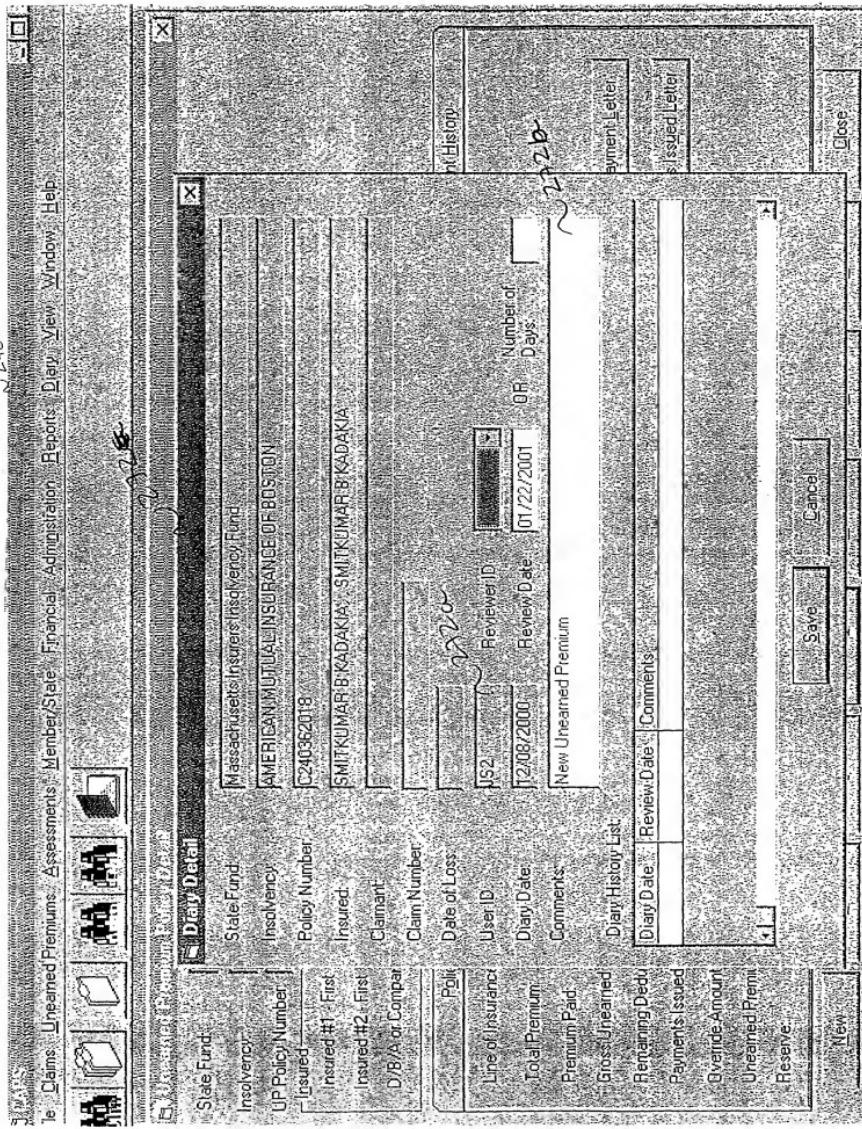
X

X

X

111-1171

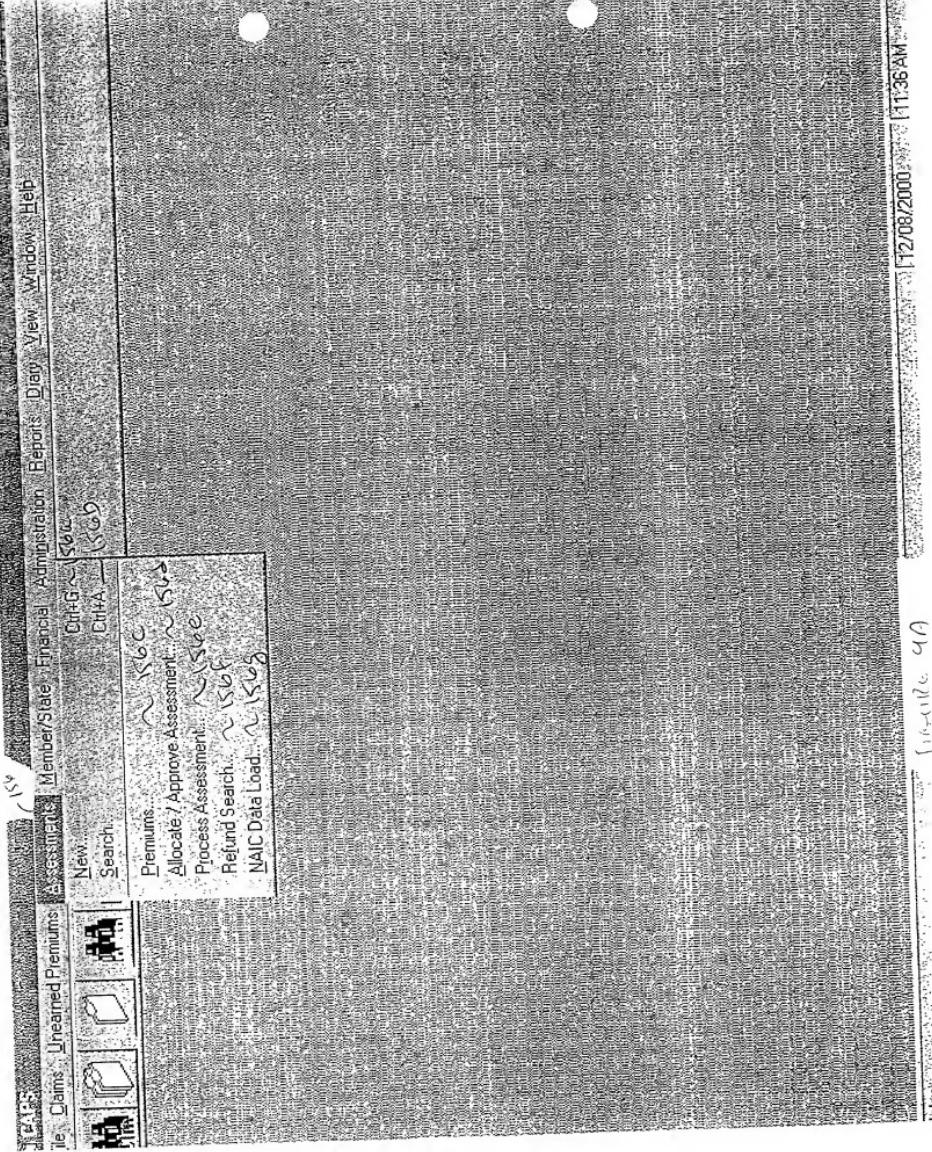
F-4-A-13



12/08/2000 11126 AM

10

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LEADS

Claims	Unearned Premiums	Assessments	Member/State	Financial	Administration	Reports	Diary	View	Window	Help

Premium Summary

Sale Fund: Year: Insolvency Date: NAIC #: Member Find: Status: Find:

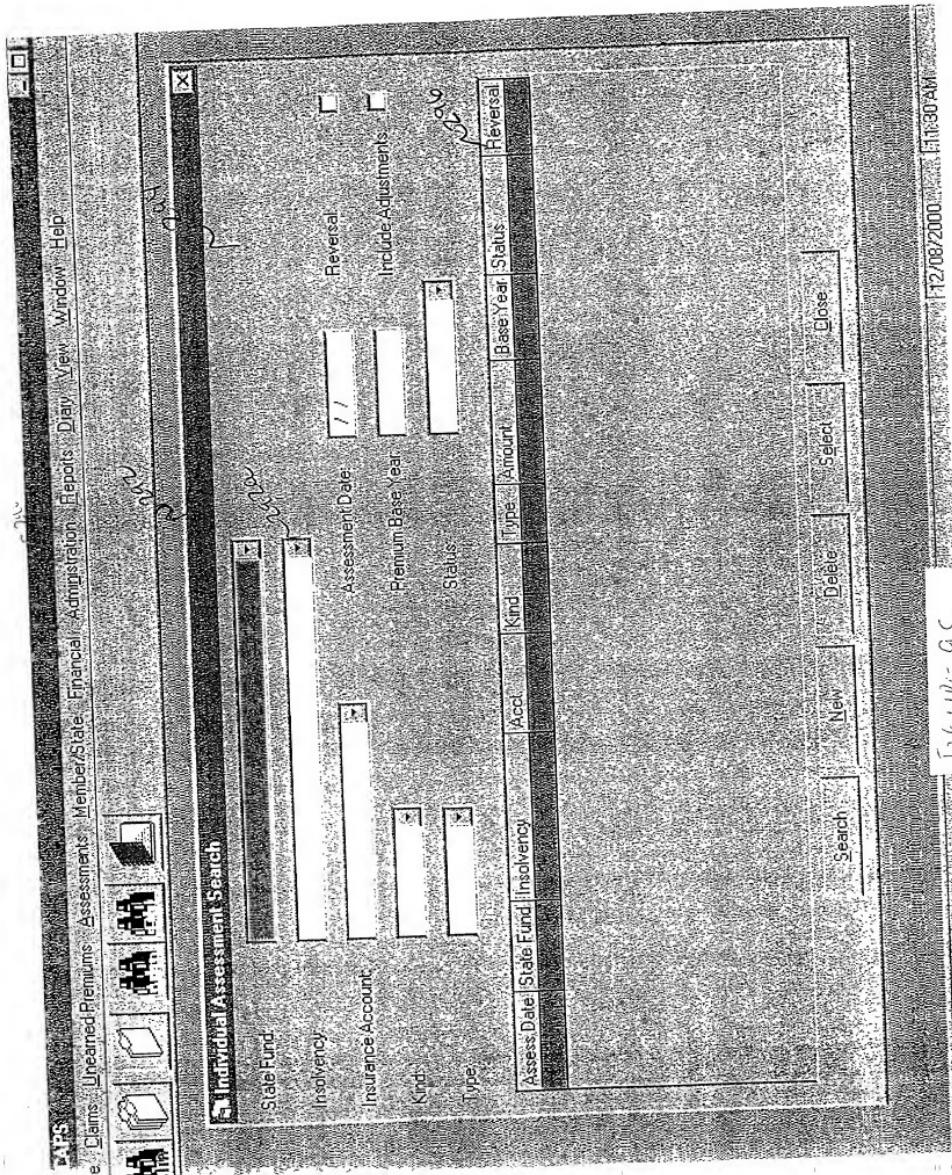
Premium Subtotals

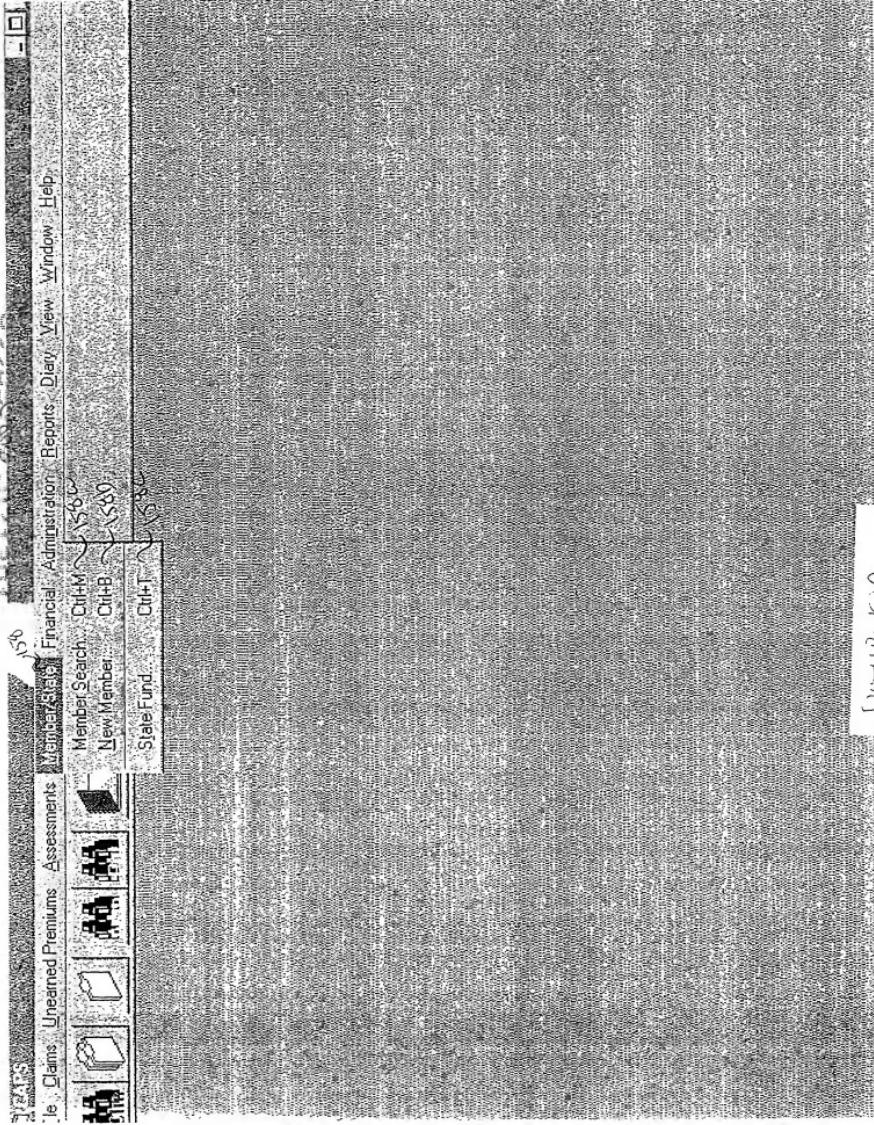
Member	NAIC #

Premium Details

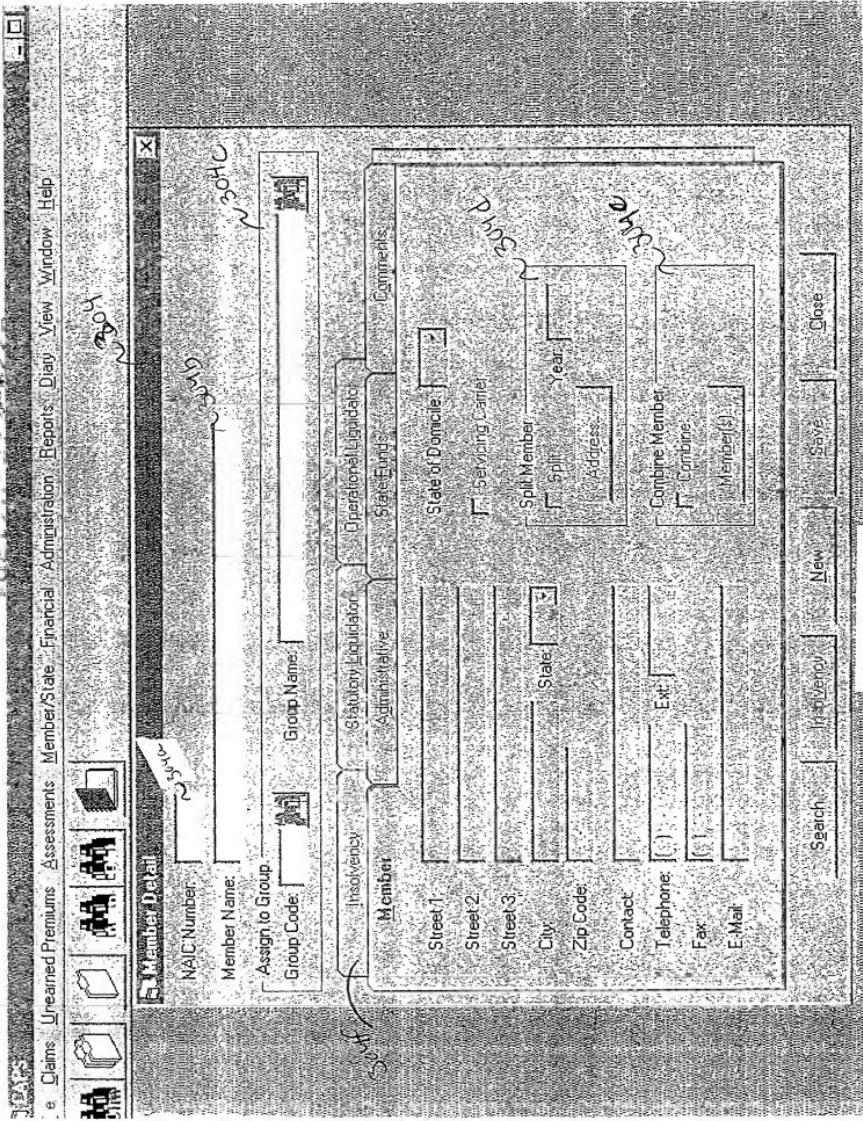
Add Premium: Delete Premium: Insolvency Dates: Calculate State Law: Close:

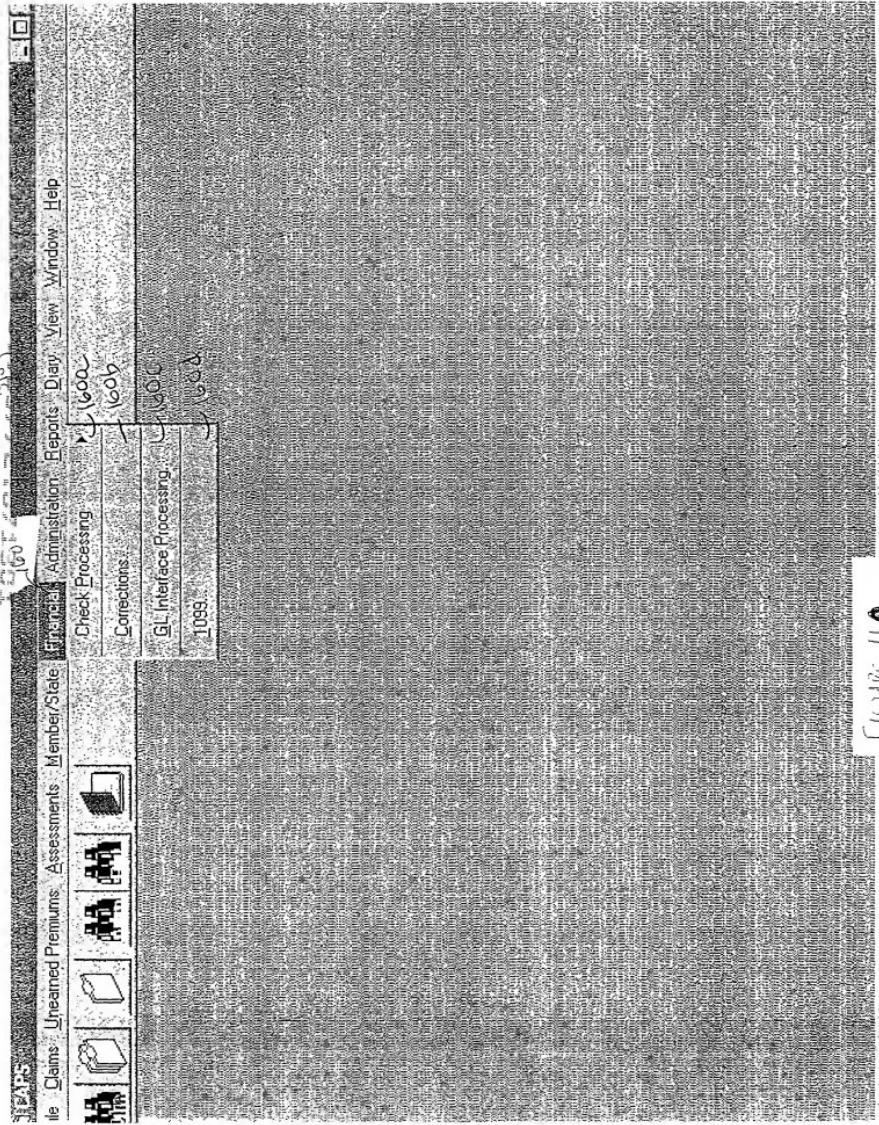






115-0010KA





FILE II

12/18/2001 11:37 AM



Claims	Unearned Premiums	Assessments	Member State	Financial	Admin	Policy	Report
<p>File Location</p> <p>Approvals</p> <p>Provider/Payee</p> <p>Toxic Site</p> <p>Hazardous</p> <p>UDS Map</p> <p>No LOI Code</p> <p>Insurance Account</p> <p>Security</p> <p>Claim Handler</p> <p>Change Password...</p> <p>Off-W...</p>							

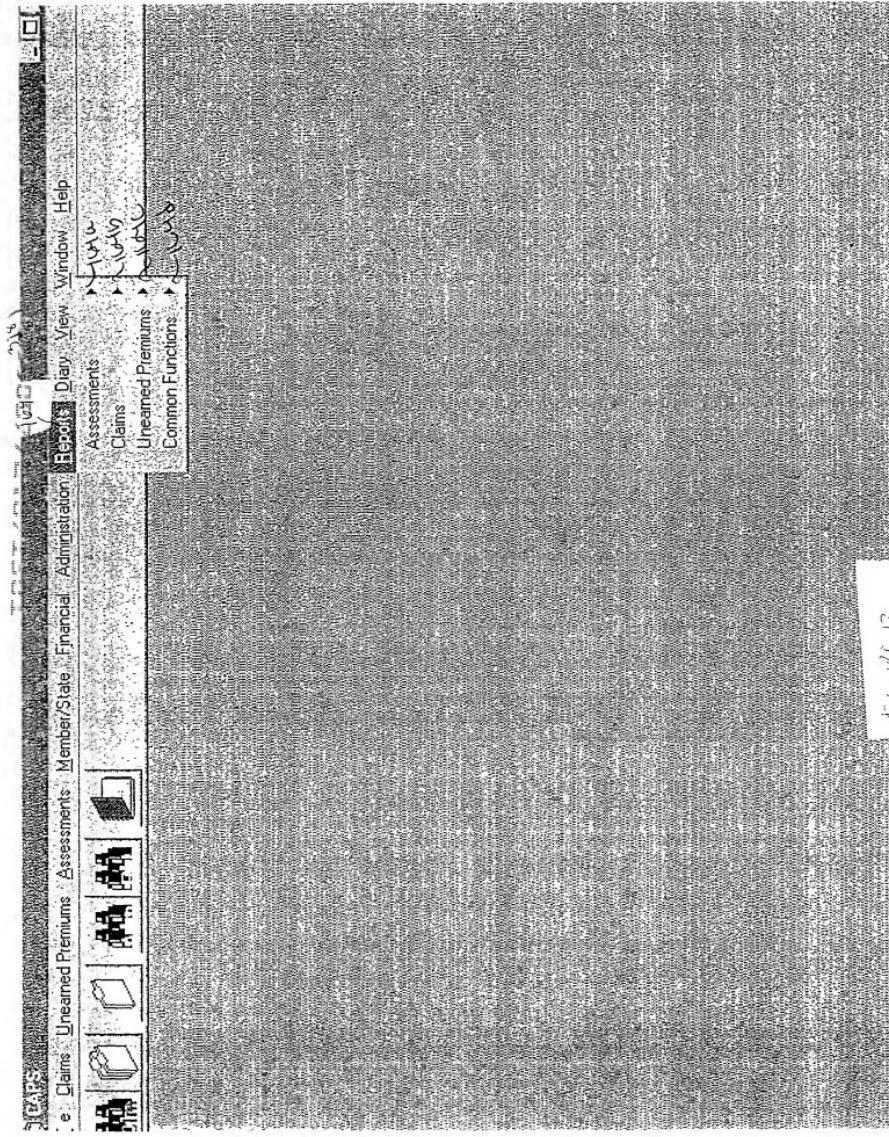
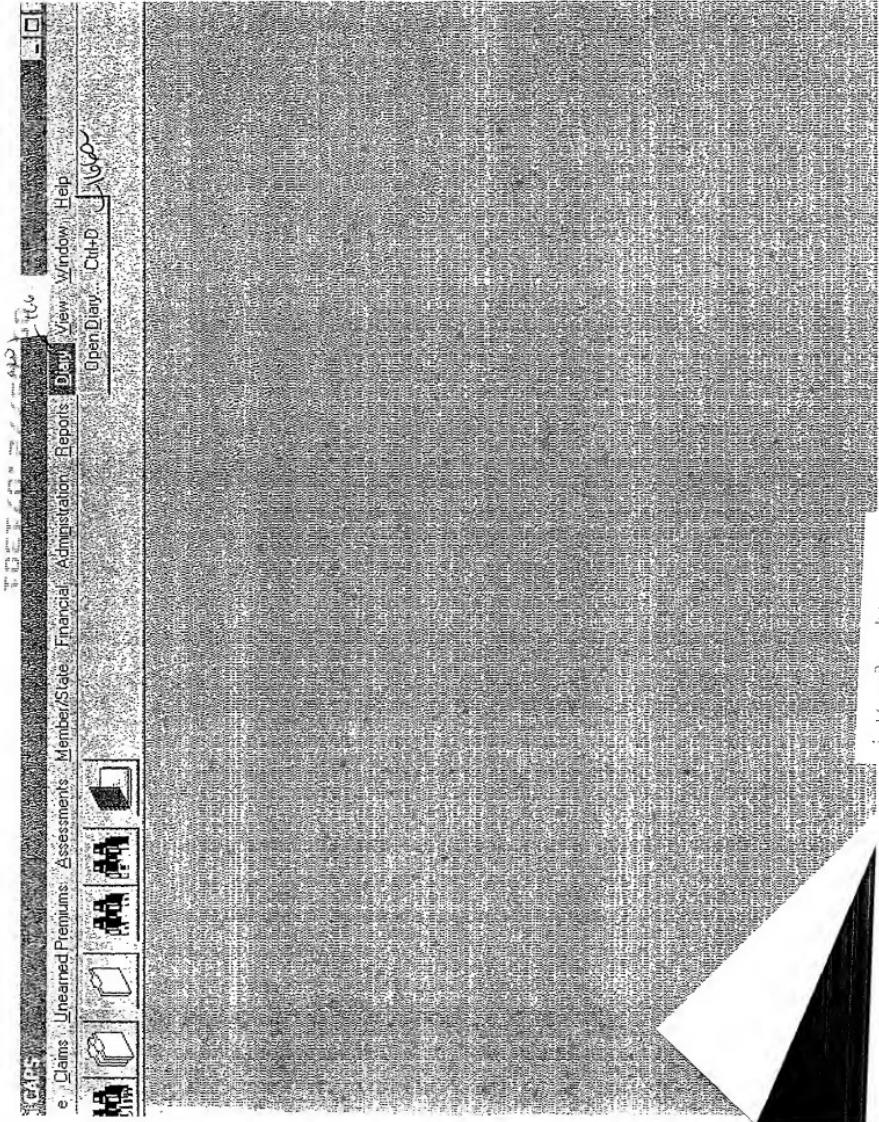


Figure 13



16-17

File Claims Unearned Premiums Assessments Member/State Financial Administration Reports Data View Window Help



Change Password

User ID:

Old Password:

New Password:

Confirm New Password:

Cancel OK

ibus

1117817C 15

12/08/2000 11:32 AM

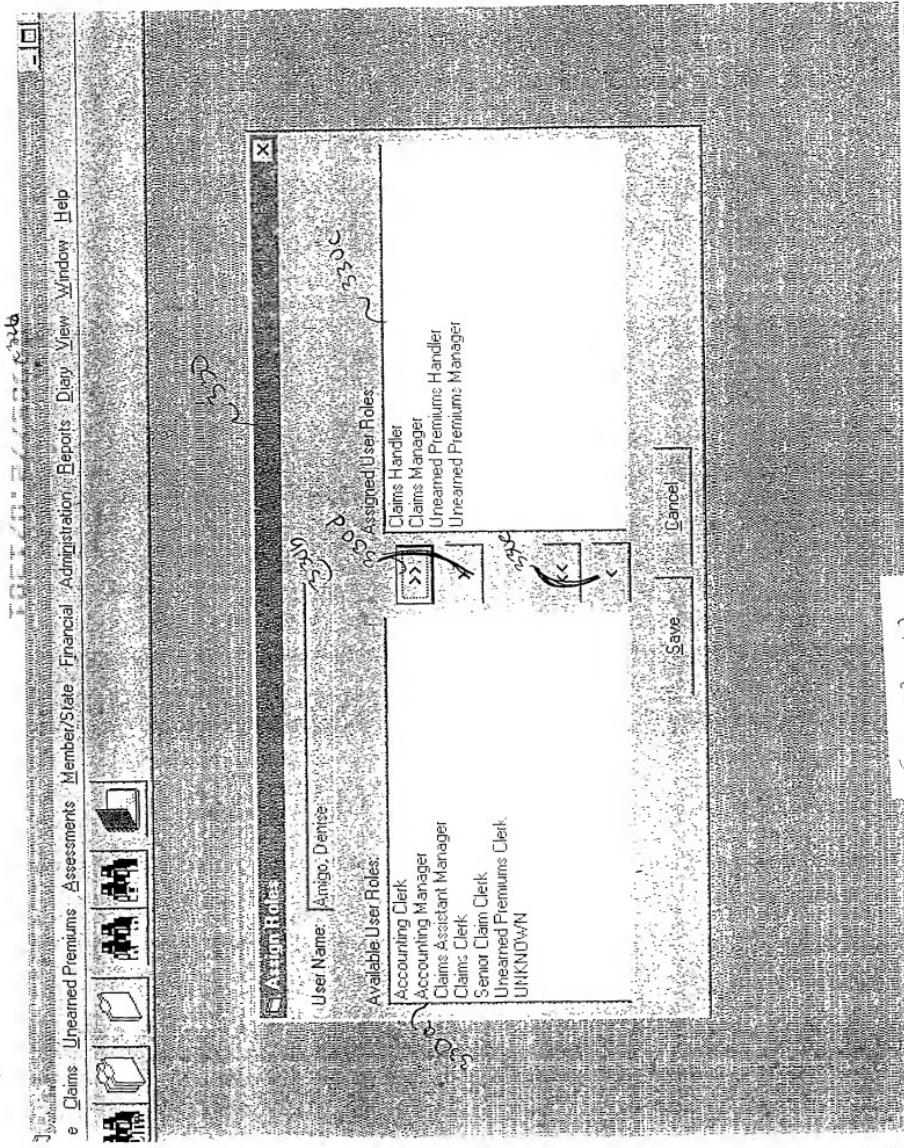
File Claims Unearned Premiums Assessments Member/State Financial Administrator Reports Dial View Window Help



User

User ID	User Name	Status
DA1	Amigo, Darlene	Active
LA2	Anderson, Laura	Active
LA1	Angelone, Linda	Active
AUDITORS	auditor, auditor	Active
BB1	Barry, Robert	Active
RFB	Barry, Robert	Active
RB1	Bell, Richard	Active
VB1	Bena, Vivian	Active
MB1	Biever, Marisa	Active
DB1	Brown, Donald	Active
LC2	Cardinal, Leanne	Active

New... Modify... Assign Roles... Close



e CLAIMS Unearned Premiums Assessments Member/State Financial Administration Reports Diary View Window Help



Users

User ID	User Name	Status
DA1	Andrea Denise	Active
LA2	Anderson, Laura	Active
LA1	Angelone, Linda	Active
AUDITORS	auditor, auditor	Active
BB1	Barn, Robert	Active
RFB	Barry, Robert	Active
RB1	Bell, Richard	Active
VB1	Bena, Vivian	Active
MB1	Biever, Malissa	Active
DB1	Brown, Donald	Active
LC2	Cardinal, Leanne	Active

New Modify Assign Role Close

11/08/2000 10:24 AM

e Claims Unearned Premiums Assessments Member/State Financial Administration Reports Dialy View Window Help

Assignment Roles

User Name: Domingo, Denise

Available User Roles:

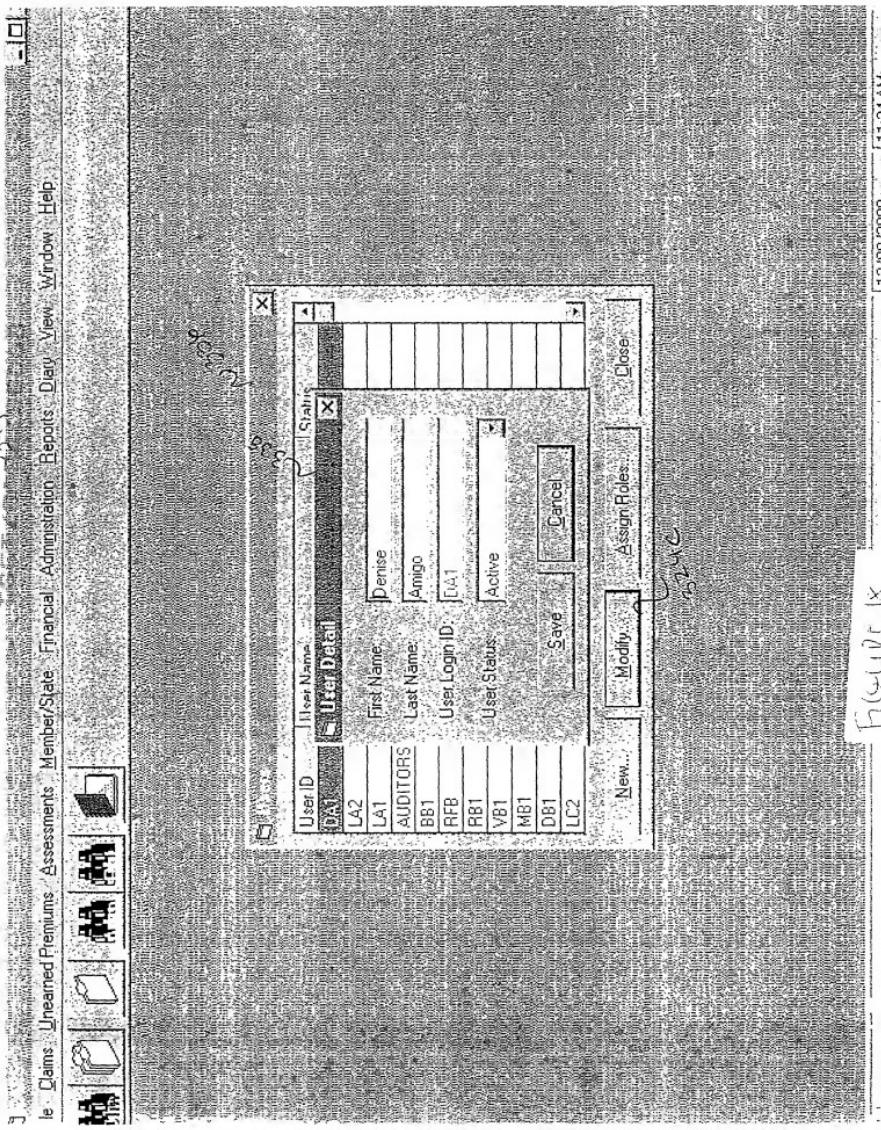
- Accounting Clerk
- Claims Assistant Manager
- Claims Clerk
- Senior Claim Clerk
- Unearned Premium Clerk
- UNKNOWN

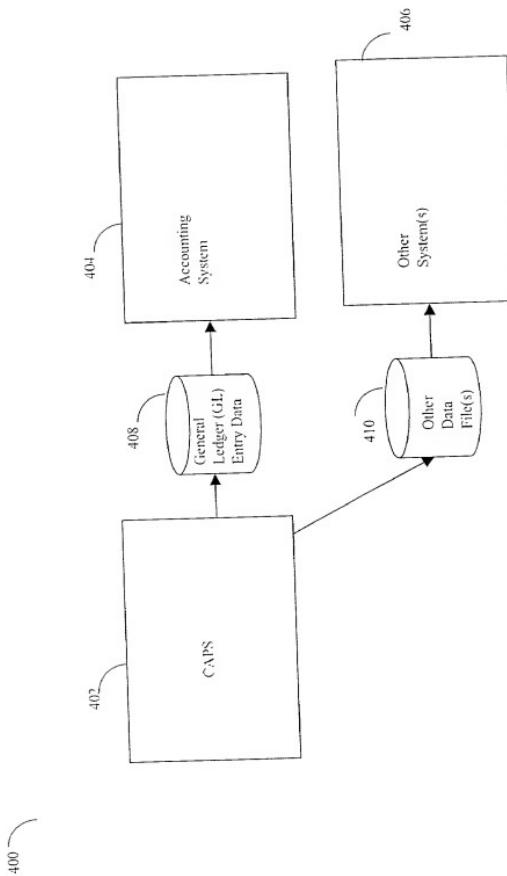
Assigned User Roles:

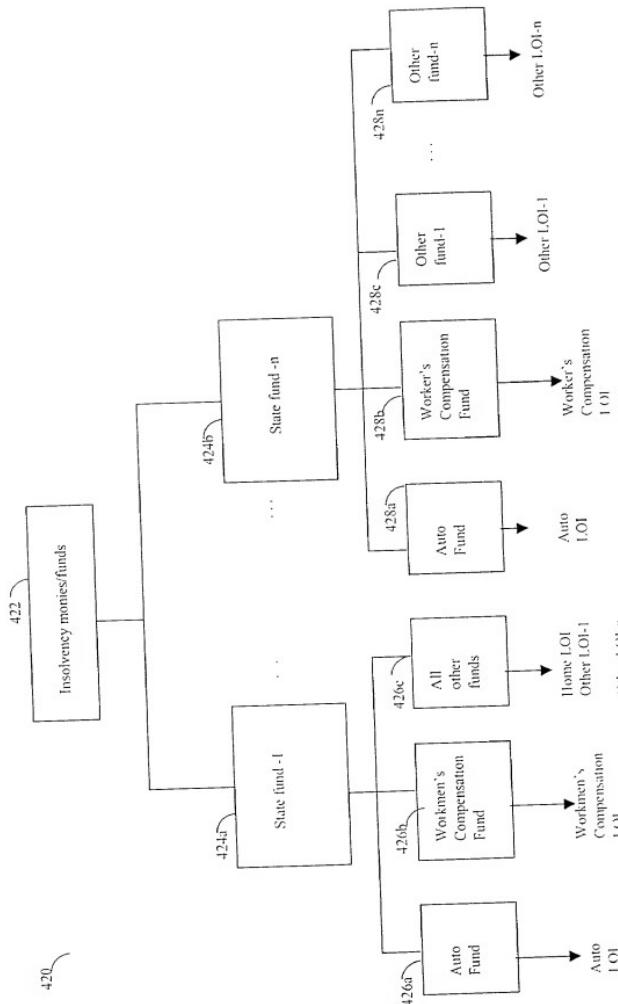
- Claims Handler
- Claims Manager
- Unearned Premiums Handler
- Unearned Premiums Manager

>>> <<<

Save Cancel







17

500

Insolvency Mapping

Insolvency: Johnson Mutual Insurance Company

State Fund: NH

Insurance Account: Auto

Coverage List:

Yes/No	Coverage Code	Coverage Description
N	305003	Commercial Auto-Liability-Bodily Injury-Combined Single or Split Limit
N	305006	Commercial Auto-Liability-Bodily Injury-Combined Single or Split Limit Aggregate
N	305009	Commercial Auto-Liability-Bodily Injury-Underinsured Motorist
N	305012	Commercial Auto-Liability-Bodily Injury-Uninsured Motorist
N	305015	Commercial Auto-Liability-Property Damage-Combined Single or Split Limit
N	305018	Commercial Auto-Liability-Property Damage-Combined Single or Split Limit Aggregate
N	305021	Commercial Auto-Liability-Property Damage-Underinsured Motorist
N	305024	Commercial Auto-Liability-Property Damage-Uninsured Motorist
N	305027	Personal Injury Protection (PIP)-No Fault
N	305030	Medical Payments
N	305033	Comprehensive or Specified Perils

Map/Unmap Save Close

Sub a Sub b Sub c

FIGURE 21

TSCETCC-22250600

SC4

502

S10 S14

Totals									
State Fund:	MA	Claim Number:	12345678901234567890						
Insolvent:	Abrington Mutual Insurance Company	GFMIS Number:	GF00000001						
Policy Number:	HPO202400000000000000	Date of Loss:	04/27/1999						
Claimant		Coverage							
Claimant:	Bronson Klopferstein								
Coverage List									
Coverage	Loss Res.	Loss Paid	Loss Pend.	Exp. Res.	Exp. Paid	Exp. Pend.	Loss Recovery	Exp. Recovery	Offset
Benefits	\$300,000.00	\$20,000.00	\$2,000.00	\$40,000.00	\$4,000.00	\$0	\$1,000.00	\$100.00	\$500.00
Medical Expense	\$110,000.00	\$600.00	\$0	\$5,000.00	\$1,000.00	\$0	\$1,000.00	\$0	\$0
COLA	\$3,000.00	\$500.00	\$150.00	\$1,000.00	\$200.00	\$50.00	\$0	\$0	\$0
Claimant Totals	\$314,000	\$21,000	\$2,150	\$46,000	\$5,200	\$50	\$2,000	\$100	\$500
Claim Totals	\$600,000	\$60,000	\$10,000	\$90,000	\$15,000	\$3,000	\$7,000	\$500	\$1,000
<input type="button" value="Close"/> <input type="button" value="Print"/>									

FIGURE 22

520

522

524

526

Totals									
State Fund	MA	Claim Number	12345678901234567890						
Inservency	Abington Mutual Insurance Company	GFMIS Number	GFM00000001						
Policy Number	HPO2024000000000000	Date of Loss	04/27/1999						
Claimant					Coverage				
Coverage	Benefits								
Claimant List									
Claimant	Loss Recd.	Loss Paid	Loss Pend.	Exp. Recd.	Exp. Paid	Exp. Pend.	Loss Recovery	Exp. Recovery	Offical
Bronson Klogfrenster	\$300,000.00	\$20,000.00	\$2,000.00	\$40,000.00	\$4,000.00	\$0	\$2,000.00	\$150.00	\$600.00
John Smith	\$200,000.00	\$30,000.00	\$3,000.00	\$40,000.00	\$5,000.00	\$1,000.00	\$0	\$0	\$0
Coverage Totals	\$500,000	\$50,000	\$5,000	\$80,000	\$9,000	\$1,000	\$2,000	\$150	\$600
Claim Totals	\$600,000	\$60,000	\$10,000	\$90,000	\$15,000	\$3,000	\$7,000	\$500	\$1,000
<input type="button" value="Close"/>									

F10URE 23

530

a. Diary Detail

State Fund:	R.I. Ins. Insolvency Fund	Ex
Insolvency:	United Community Insurance Co.	532
Policy Number:	WC 447824	
Insured:	South Kingstown School Dept.	
Claimant:	Jason Rodner	
Claim Number:	435678	
Date of Loss:	02/13/1999	
User ID:	gwl	Reviewer ID: dft 533a
Diary Date:	05/10/1999	Review Date: 06/30/1999 DB 533b
Comments:	New Claim	Number of Days:

534

Diary History List

Diary Date	Review Date	Comments
------------	-------------	----------

536

Save Cancel

FIGURE 24

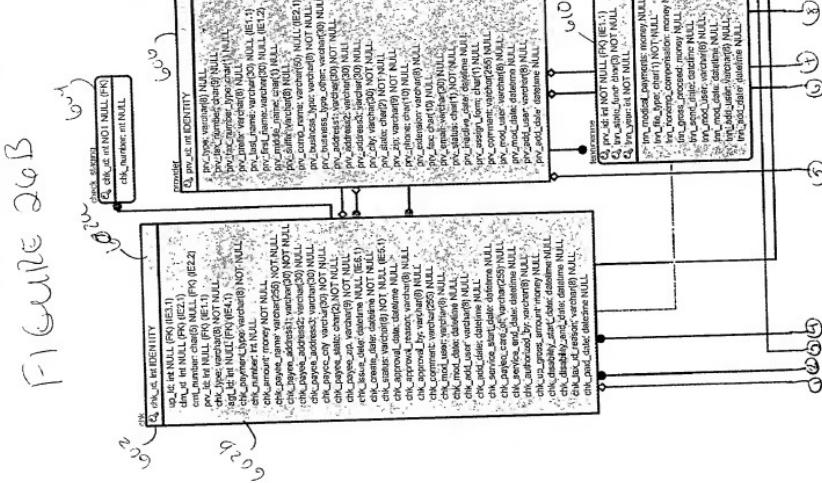
Action	Diary Type	Claim	Unearned Premium	Generic ⁺
Approval	when a claim payment is deleted	Claim payment approval	✓	
Approval	when an unearned premium payment is deleted	Up payment approval		✓
Approval	when the closing of a claim is rejected	Claim closing approval	✓	
Approval	when the closing of an unearned premium is rejected	Up closing approval		✓
Claim	when a claim status is changed to "close"	Claim status changed	✓	
Unearned Premium	when an unearned premium status is changed to "close"	Up status changed		✓
LOI	when a LOI is modified	Loi modified		✓
LOI	when a LOI is deleted	Loi deleted		✓
Notes	when a claim note is sent to a reviewer	Claim note	✓ ¹	
Notes	when a claimant note is sent to a reviewer	Claimant note	✓	
Notes	when an unearned premium note is sent to a reviewer	Up note		✓
Reserve	when a reserve is adjusted for a claimant	Claim reserve	✓	
Reserve	when a reserve is adjusted for a unearned premium policy	Up reserve		✓
Taxpayer	when a new taxpayer is added	New taxpayer		✓
Taxpayer	when a taxpayer is modified	Modify taxpayer		✓
Claimant	When the user enters or adjusts a reserve above a user's preset reserve aggregate or increment limit, then a diary is sent to a Claim Manager for approval.	Claimant reserve above limit	✓	

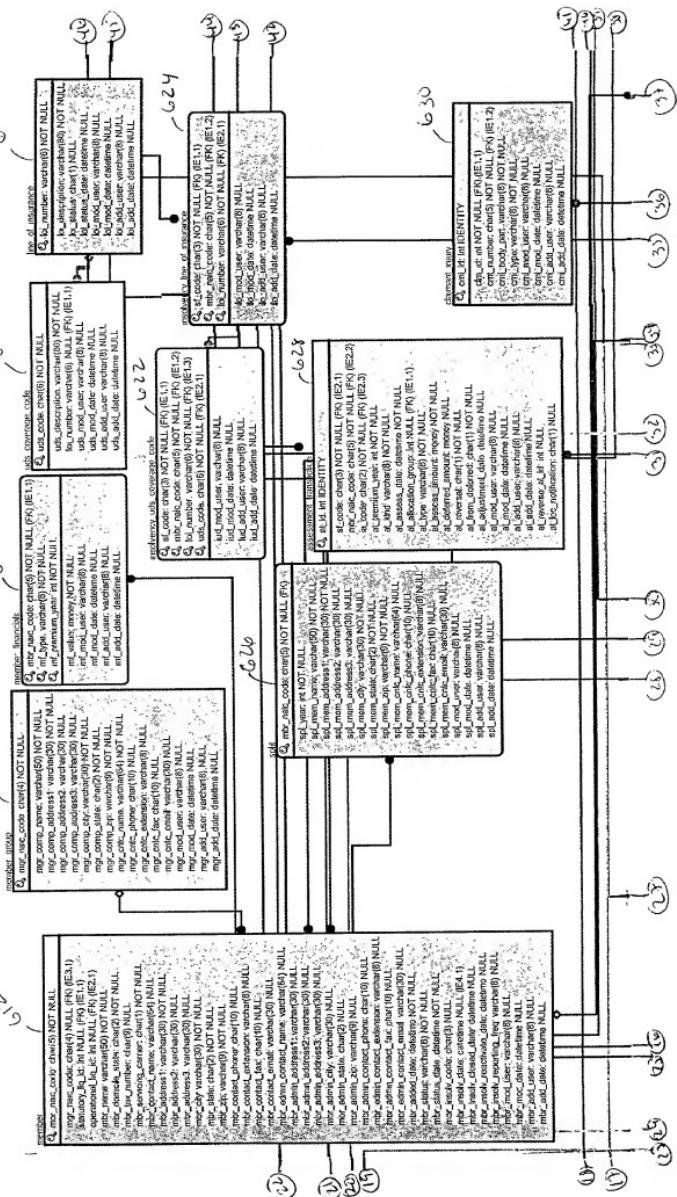
FIGURE 25

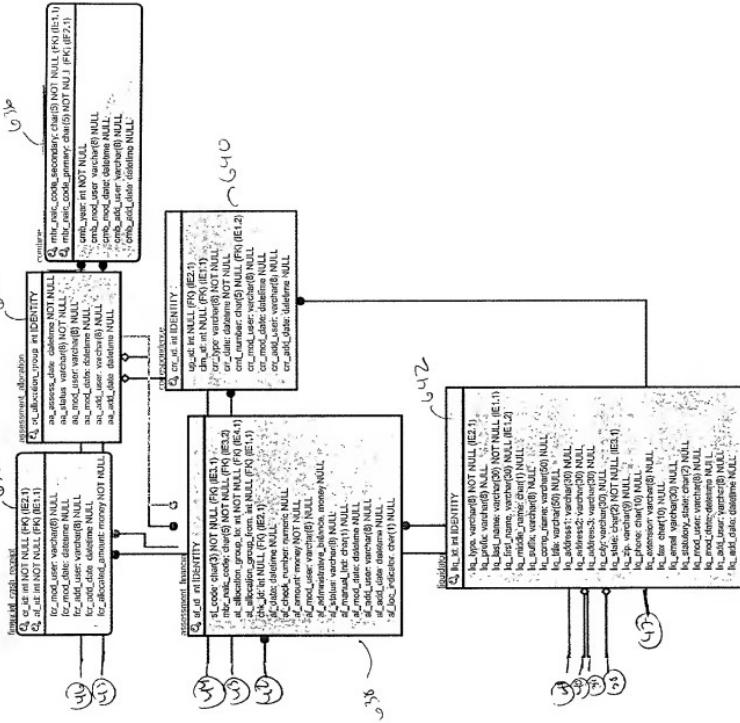
F1 Genie JGP

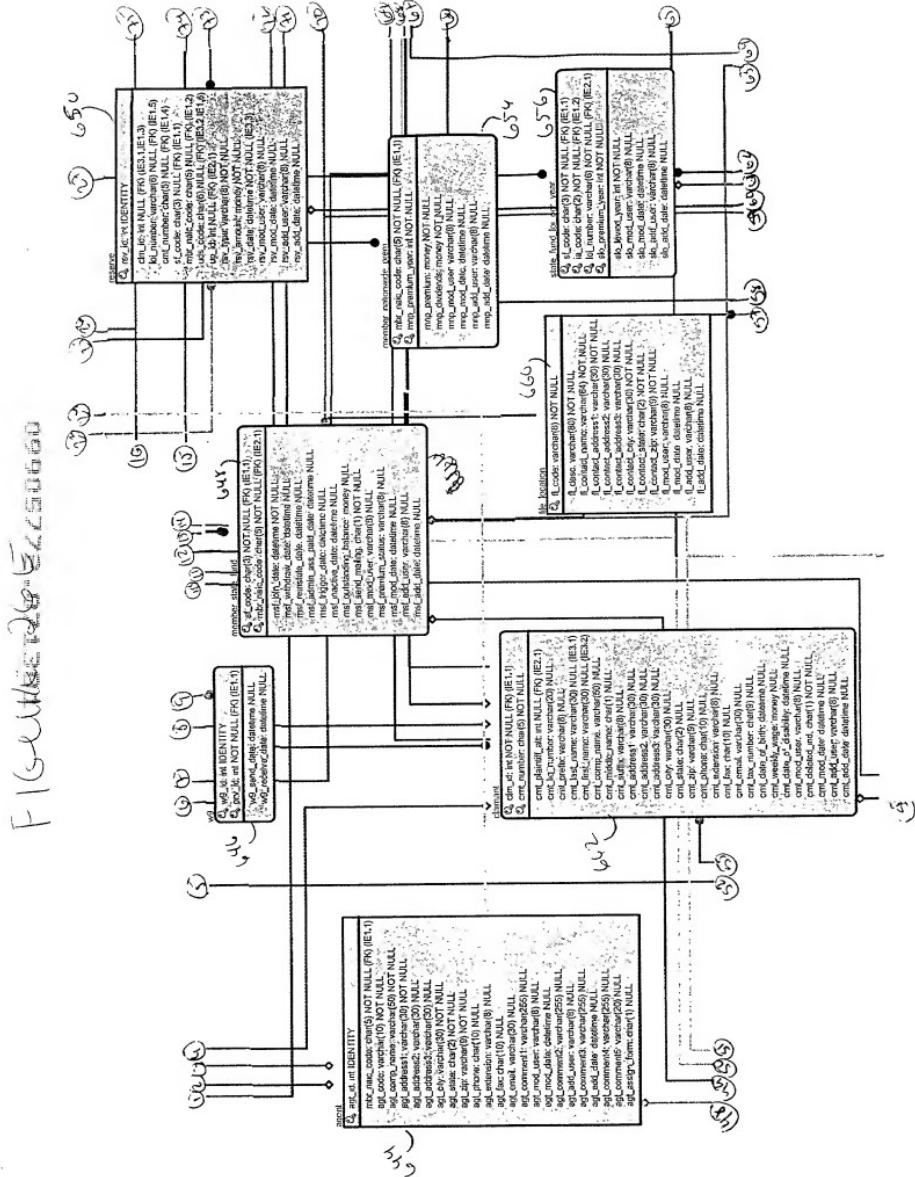
ZuB	ZuC	ZuD	ZuE	ZuF	ZuG	ZuH	ZuI
-----	-----	-----	-----	-----	-----	-----	-----

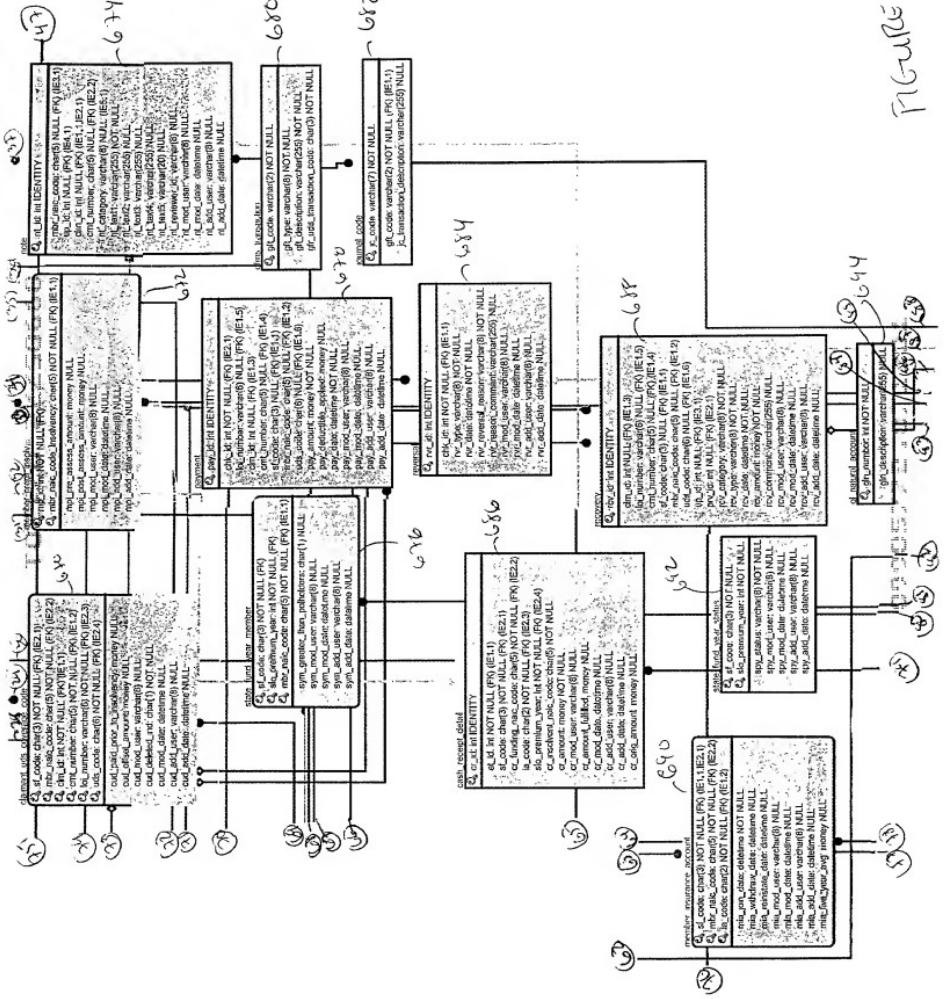
6000

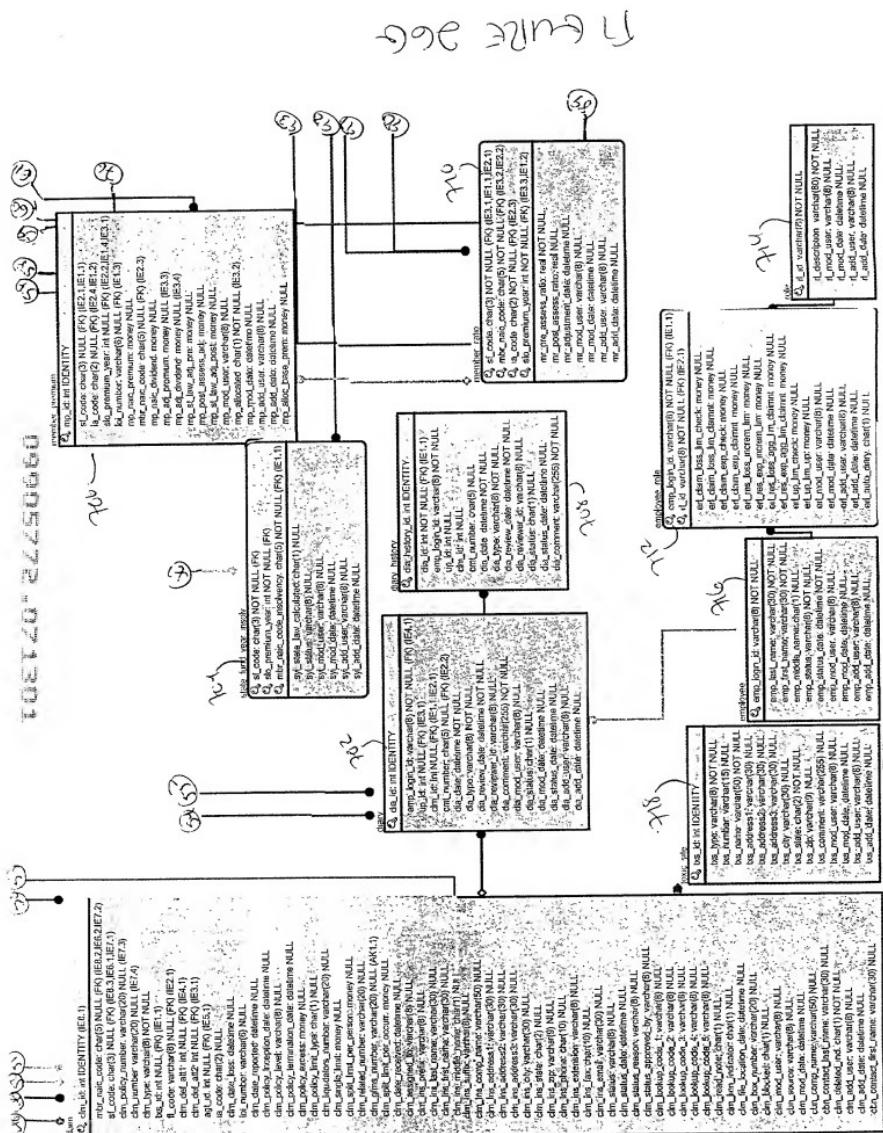






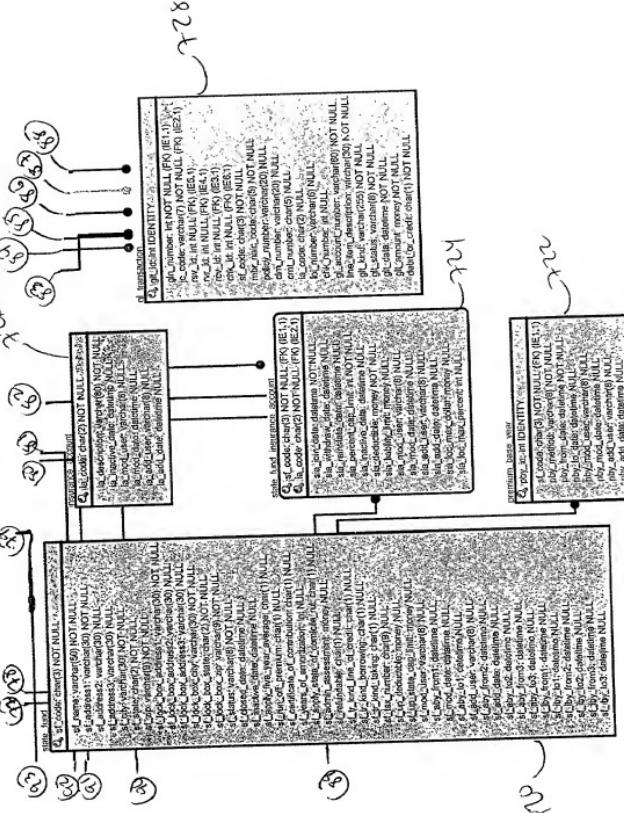








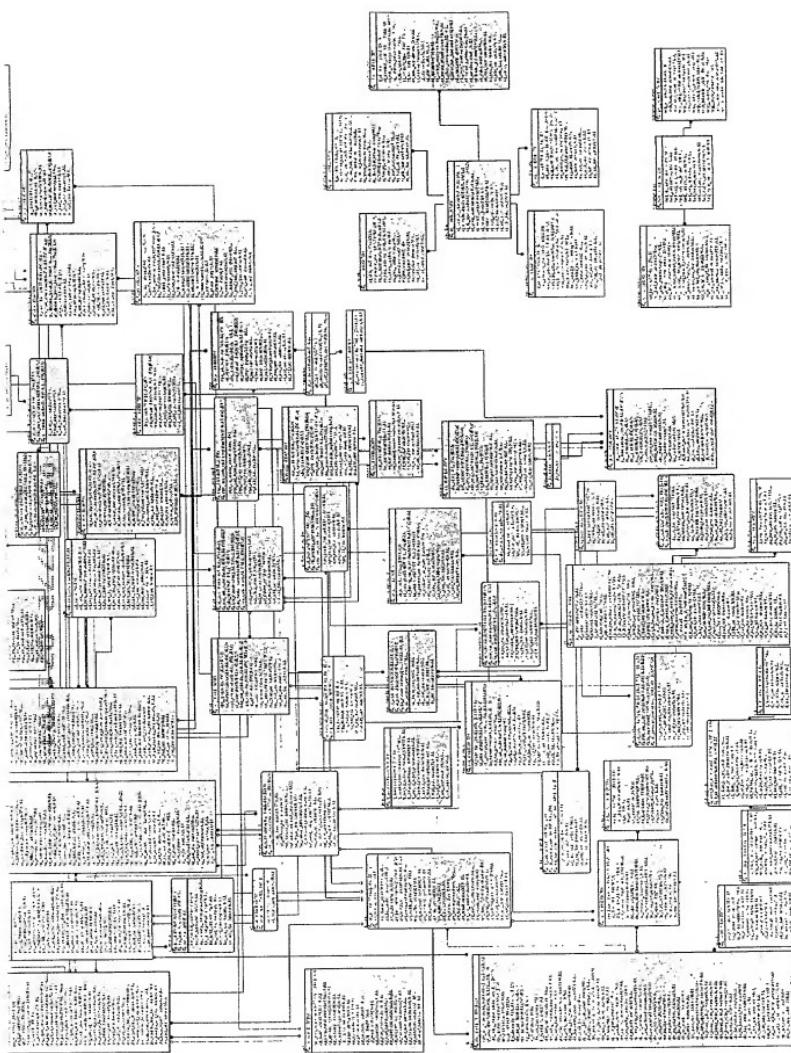
16

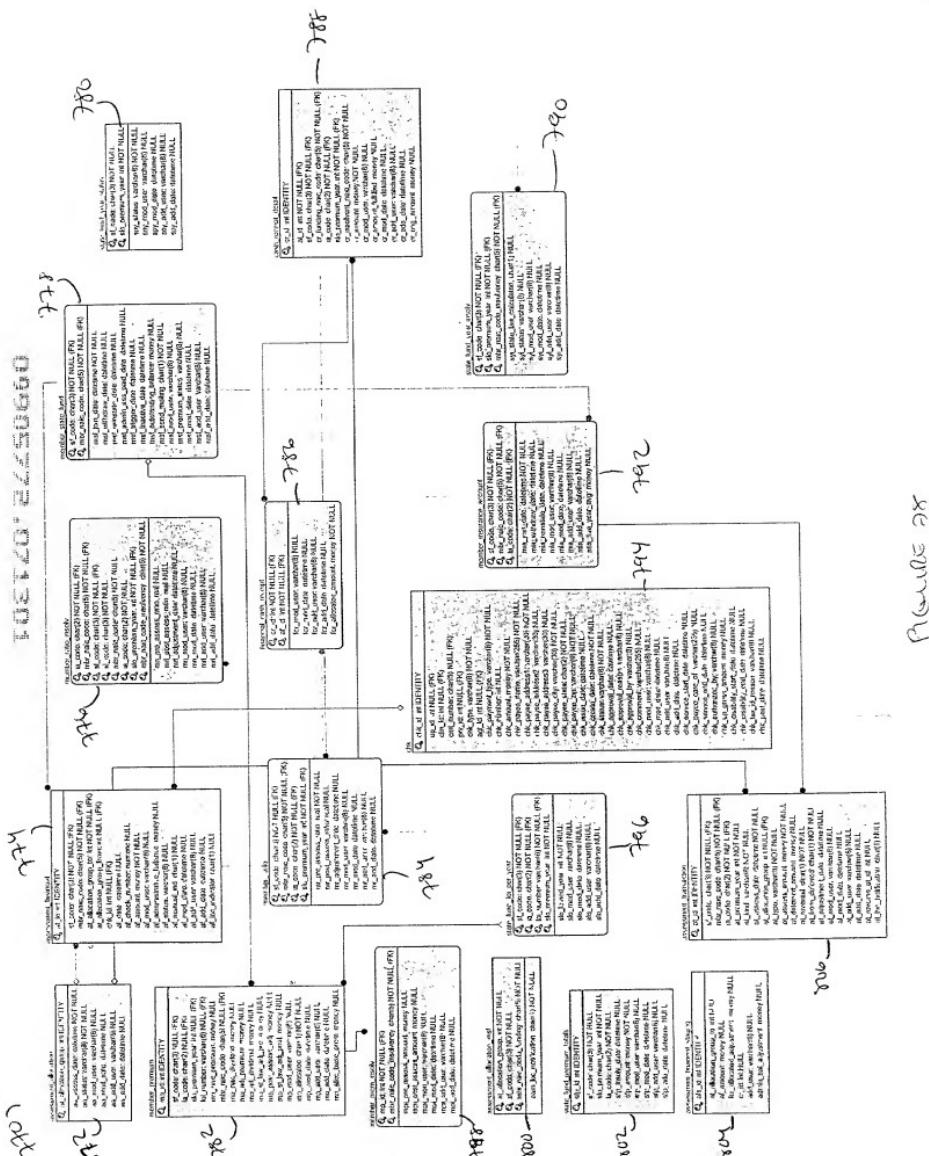


Fri Oct 12th 1900 2000

FIGURE 34

FIGURE 35





Screens of Assessments

NAIC Data Load

NAIC Data Load

NAIC Load History

Premium Year	State Fund	File Type	Date	Records Staged	Records Loaded	Status
1999	VA	MEMPREM	08/28/2000	40480	29991	LOADED
1999	CT	MEMPREM	08/27/2000	34540	24336	LOADED
1999	RI	MEMPREM	08/27/2000	32960	24024	LOADED
1999	VT	MEMPREM	08/25/2000	31400	20124	LOADED
1999	NH	MEMPREM	08/24/2000	29400	18759	LOADED
1999	ME	MEMPREM	08/23/2000	30000	19071	LOADED
1999	MA	MEMPREM	08/22/2000	34720	23829	LOADED
1999	DC	MEMPREM	08/21/2000	35080	25584	LOADED

Buttons at the bottom:

- Stage from File...
- Preview Data...
- Load into CAPS
- Clear
- Cancel

1004

1000
1001a

1006b

1006c

1006d

1006e

1006f

~1002a

~1002b

~1002c

~1002d

~1002e

=1001RE 29

DATA LOAD = 2/25/2000

NAIC Data Preview - MEMPREM




NAIC Data Preview - MEMPREM

Member Find				Filter	
Premium Year:	1999	NAIC #:		Find	<input checked="" type="radio"/> All <input type="radio"/> Loaded <input type="radio"/> Not Loaded
State Fund:	VA				
NAIC	State Fund	101	Premium	Dividends	Unpaid
10014	VA	1	1632932	0	0 Y
10014	VA	2.1	94363	0	0 Y
10014	VA	2.2	0	0	0 Y
10014	VA	2.3	0	0	0 Y
10014	VA	3	0	0	0 Y
10014	VA	4	4784	940	15804 Y
10014	VA	5.1	39856	0	0 Y
10014	VA	5.2	0	0	0 Y
10014	VA	6	0	0	0 Y
10014	VA	8	136029	0	48026 Y
10014	VA	9	600117	0	3075 Y
10014	VA	10	0	0	0 Y
10014	VA	11	0	0	0 Y
10014	VA	12	0	0	0 Y
10014	VA	13	0	0	0 Y
10014	VA	14	0	0	0 Y
10014	VA	15.1	0	0	0 Y
10014	VA	15.2	0	0	0 Y
10014	VA	15.3	0	0	0 Y

Cancel

Figure 30

NAIC File Staging




NAIC File Staging

State Fund:	<input type="text"/>
Premium Year:	1999
File Type:	Demographics
File Name:	<input type="text"/>
Status:	<input type="text"/>
% Complete:	<input type="text"/>
<input type="button" value="OK"/> <input type="button" value="Options..."/> <input type="button" value="Close"/>	

Figure 31

NAIC Data File Selection

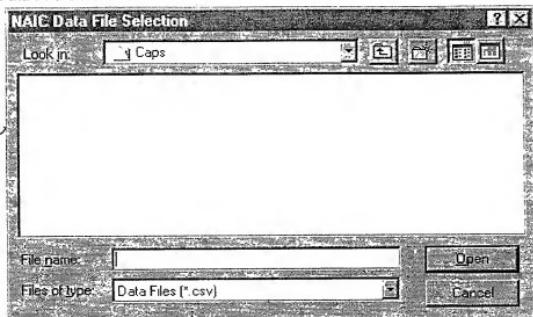


FIGURE 32

NAIC Data Load Options

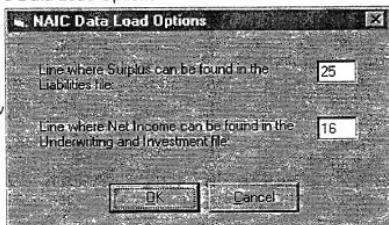


FIGURE 33

1000572 - 071301

Premium Summary / Premium Subtotals Tab (scroll left)

Premium Subtotals						Member Ratios
Member	NAIC #	Auto	Other P.A.	Workers' Compens.	Total	(Non-Assessable) Auto P.A.
AFFILIATED FM INSURAN	10014	0	1,087,496	3	1,087,501	325,967
ARBELLA INDEMNITY INS	10017	0	0	0	0	0
AGWAY INSURANCE CO.	10022	3,721	789	0	0	4,499
ACE INDEMNITY INSURAI	10030	0	0	0	0	0
AMERICAN BANKERS INS	10111	87,833	1,844,745	0	1,932,578	754,632
AMERICAN LIVE STOCK I	10200	0	0	0	0	0
NATIONAL CONTINENTAL	10240	0	0	0	0	0
APPALACHIAN INSURANT	10316	0	0	0	0	0
NOBEL INSURANCE CO.	10340	0	74	0	74	57,432
AVEMCO INSURANCE CO.	10367	0	159,302	0	159,302	21,593
AMERICAN CENTENNIAL	10391	0	80,000	0	80,000	74,182
SUMMIT INSURANCE CO.	10420	155,640	351,920	0	507,560	0
CANAL INSURANCE COM	10464	1,193,321	38,491	0	1,237,812	0
CHRYSLER INSURANCE C	10489	697,882	132,893	1,195	831,760	10,837
CAROLINA CASUALTY INS	10510	109,930	5,975	0	115,905	0
PROSELECT INSURANCE	10638	0	0	0	0	0

Premium Detail Add Premium Insolvency Dates Calculate State Law Close

FIGURE 34

Premium Summary / Premium Subtotals Tab (scroll right)

Premium Subtotals						Member Ratios
Member	NAIC #	Add P.A.	Other P.A.	Workers' Compens.	Total P.A.	(Non-Assessable) P.A.
AFFILIATED FM INSURAN	10014	0	0	0	0	564,381
ARBELLA INDEMNITY INS	10017	0	0	0	0	0
AGWAY INSURANCE CO.	10022	0	0	0	0	18
ACE INDEMNITY INSURAI	10030	0	0	0	0	0
AMERICAN BANKERS INS	10111	87,833	679,289	0	767,121	345,348
AMERICAN LIVE STOCK I	10200	0	0	0	0	0
NATIONAL CONTINENTAL	10243	0	0	0	0	0
APPALACHIAN INSURANT	10316	0	0	0	0	0
NOBEL INSURANCE CO.	10340	0	0	0	0	0
AVEMCO INSURANCE CO.	10367	0	0	0	0	21,593
AMERICAN CENTENNIAL	10351	0	0	0	0	80,600
SUMMIT INSURANCE CO.	10430	0	0	0	0	6,327
CANAL INSURANCE COM	10464	0	0	0	0	39,491
CHRYSLER INSURANCE C	10489	0	0	0	0	3,645
CAROLINA CASUALTY INS	10510	0	0	0	0	5,575
PROSELECT INSURANCE	10638	0	0	0	0	0

Premium Detail Add Premium Insolvency Dates Calculate State Law Close

FIGURE 35

Member Ratios Tab (scroll left)

1144cv

Member	NAIC #	MVR	Auto	Other	Member Ratios		
					Workers' Comp	Auto PA	Other PA
INFILATED FM INSURANCE CO	10014	0	0.00000000	0.00297785	0.00000011		
ABELLA INDEMNITY INSURANCE CO	10017	0	0.00000000	0.00000000			
AGWAY INSURANCE CO	10222	0	0.0000672	0.0000204	0.00000000		
ACE INDEMNITY INSURANCE CO	10300	0	0.00000000	0.00000000	0.00000000		
AMERICAN BANKERS INSURANCE CO	10111	0	0.0015860	0.04489175	0.00000000	0.00179760	
AMERICAN LIFE STOCK CO	10203	0	0.00000000	0.00000000	0.00000000		
NATIONAL CONTINENTAL INSURANCE CO	10243	0	0.00000000	0.00000000	0.00000000		
APPALACHIAN INSURANCE CO	10315	0	0.00000000	0.00000000	0.00000000		
NIBEL INSURANCE COMPANY	10346	0	0.00000000	0.00000020	0.00000000		
AVEMICO INSURANCE CO	10362	0	0.00000000	0.0042156	0.00000000		
AMERICAN CENTENNIAL INSURANCE CO	10291	0	0.00000000	0.00021170	0.00000000		
SUMMIT INSURANCE CO	10430	0	0.0028104	0.00083129	0.00000000		
CANAL INSURANCE COMPANY	10454	0	0.0216564	0.00016186	0.00000000		
CHRYSLER INSURANCE CO	10493	0	0.00129382	0.00035165	0.00004286		
CAROLINA CASUALTY INSURANCE CO	10510	0	0.00019850	0.00001555	0.00000000		

1142a

1146a

FIGURE 36

Premium Summary / Member Ratios Tab (scroll right)

11409

Member	NAIC #	MVR	Auto	Other	Member Ratios		
					Workers' Comp	Auto PA	Other PA
INFILATED FM INSURANCE CO	10014	0	0.00297785	0.00000011			
ABELLA INDEMNITY INSURANCE CO	10017	0	0.00000000	0.00000000			
AGWAY INSURANCE CO	10222	0	0.0000672	0.0000204	0.00000000		
ACE INDEMNITY INSURANCE CO	10300	0	0.00000000	0.00000000	0.00000000		
AMERICAN BANKERS INSURANCE CO	10111	0	0.04489175	0.00000000	0.00179760		
AMERICAN LIFE STOCK CO	10203	0	0.00000000	0.00000000			
NATIONAL CONTINENTAL INSURANCE CO	10243	0	0.00000000	0.00000000			
APPALACHIAN INSURANCE CO	10315	0	0.00000000	0.00000000			
NIBEL INSURANCE COMPANY	10346	0	0.0042156	0.00000000			
AVEMICO INSURANCE CO	10362	0	0.00000000	0.00021170	0.00000000		
AMERICAN CENTENNIAL INSURANCE CO	10291	0	0.00083129	0.00000000			
SUMMIT INSURANCE CO	10430	0	0.00016186	0.00000000			
CANAL INSURANCE COMPANY	10454	0	0.00035165	0.00004286			
CHRYSLER INSURANCE CO	10493	0	0.00001555	0.00000000			
CAROLINA CASUALTY INSURANCE CO	10510	0	0.00000000				

1146a

FIGURE 37

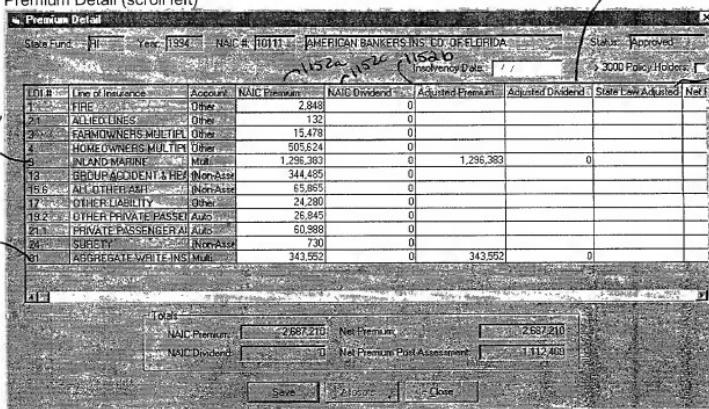


Figure 38

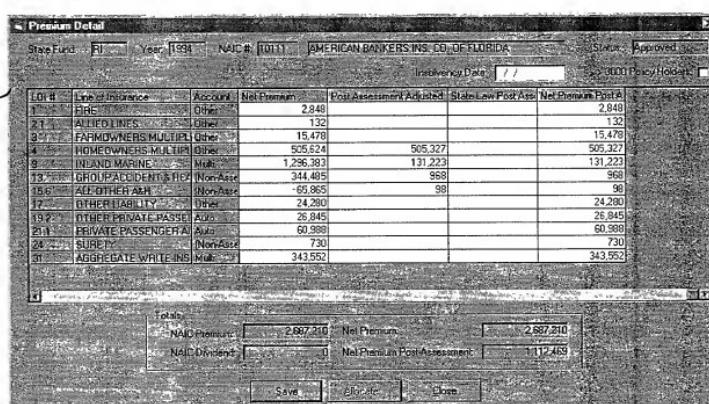


FIGURE 39

Aggregate write-in Allocation window

The screenshot shows the 'AGGREGATE WHITE-INS Allocation' window. At the top, there's a status bar with 'Allocation Base Total: 0', 'Status: Approved', and a date '11/16/2001'. On the right, a 'Insurance Account Total' table shows a single row for 'Non-Available' accounts with a total of 343,552. The main area contains a grid of allocation details:

ID#	Line of Insurance	Account	Allocation Rate	Premium	Dividend	Status	Inv.	Net	Post Allocation
31995	CONVERSION - AUTO	Auto	0	0	0	Open		0	0
31997	CONVERSION - OTHER	Other	0	0	0	Open		0	0
31998	CONVERSION - WORKERS	Workers	0	0	0	Open		0	0
31995	CONVERSION - NONE	Non-Accr	343,552	0	0	Closed		343,552	343,552

Handwritten notes on the left side of the grid include '1160a', '1160b', '1160c', and '1160d'. Handwritten notes on the right side of the grid include '1162a', '1162b', '1162c', and '1162d'. Buttons at the bottom are 'Save' and 'Cancel'.

FIGURE 40

Insolvency Date Maintenance

The screenshot shows the 'Insolvency Date Maintenance' window. On the left, under 'Available Insolvencies', there is a list of companies with their respective dates of insolvency:

- Empire Mutual Insurance Company 09/07/1998
- Allied Fidelity Insurance Company 07/15/1998
- American Druggist Insurance Company 04/30/1998
- Carmers Insurance Company 01/16/1998
- Commercial Compensation Casualty Cor 09/26/2001
- Integrity Insurance Company 03/24/1998
- American Reserve Insurance Company 06/07/1998
- Credit General Insurance Company 01/05/2001
- Transit Casualty Company 12/03/1998

On the right, under 'Selected Insolvencies', there is a list of companies with their respective dates:

Insolvency	Date

Buttons at the bottom are 'Save' and 'Cancel'.

FIGURE 41

Gross Assessment

The screenshot shows the 'Gross Assessment' window. It includes fields for 'State Fund', 'Insolvency', 'Insurance Account', 'Kind', 'Type', 'Assessment Date', 'Amount', 'Deferred Amount', 'Premium Base Year', and 'Reversal'. Status indicators 'Status' and 'Recommended' are also present. Buttons at the bottom include 'New', 'Activate', 'Records', 'Reverse', 'Print', 'Search', 'Save', and 'Close'. Handwritten notes around the window include '1182a', '1182b', '1182c', '1182d', '1182e', '1182f', '1182g', '1182h', '1182i', '1182j', '1182k', and '1182l'.

FIGURE 42

FIGURE 43

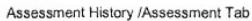
Individual Assessment Search

State Fund:	<input type="text"/> 1202a														
Insolvency:	<input type="text"/>														
Assessment Authority:	<input type="text"/>														
Assessment Date:	<input type="text"/> 1/1														
Kind:	<input type="text"/>														
Premium Base Year:	<input type="text"/>														
Type:	<input type="text"/>														
Status:	<input type="text"/>														
Reversal:	<input type="checkbox"/>														
Assess Date State Fund Insolvency Acc. Kind Type Amount Base Year Status Reversal															
<table border="1"> <tr><td>1202a</td><td>Search</td><td>New</td><td>Delete</td><td>Select</td><td>Close</td></tr> </table>										1202a	Search	New	Delete	Select	Close
1202a	Search	New	Delete	Select	Close										

Allocate / Approve Assessment

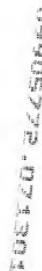
1224 FIGURE 44

FIGURE 45



State Fund	CT	NAIC #	0111	AMERICAN BANKERS INS CO OF FLORIDA
Payment / Refund		Check Number	100-6	
Date:			LOC Balance:	
Amount:		Line of Credit	Member Balance:	120-1
Assessments		Comments	Line of Credit	
Assessment Date	Adjustment Date	Amount	Paid Amount	Apply Amount
12/28/2009		16,215	16,215 N	
10/27/1999		172	172 N	
11/09/1998		-605	-605 N	
11/24/1997		-1,446	-1,446 N	
12/17/1996		-2,386	-2,386 N	
12/05/1995		-3,003	-3,003 N	
11/09/1994		-3,523	-3,523 N	
12/31/1993		-1,916	-1,916 N	
11/17/1982		-5,164	-5,184 N	
11/18/1991		673	673 N	
P.D.A.				
Assess Detail		Fee Detail	LOC Detail	Payment
				Refund
				Close

Assessment History / Comments Tab



1310

1308

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-1308-

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Assessment History			
State Fund:	CT	NA#:	10111 AMERICAN BANKERS INS CO OF FLORIDA
Program / Period:			
Date:		Check Number:	
Amount:		LOC Dates:	
Address:		Last 4 Digits:	
Assessment:		Comments:	
		Line Of Credit:	
Comment Detail: User: 05/23/2001 realsys Desc: 05/05/2001 PB-1993&1994 premium endos			
Comment: 05/23/2001 realsys 05/05/2001 PB-1993&1994 premium endos			
New Back Print Exit Help Home Log Off Close			
Assess Done! Exit Detail Print Payment Amend Back Log Off Help Close			

FIGURE 4b

Assessment History / Line of Credit Tab

1322a

1320

1322

1324

1325

1322c

Assessment History

State Fund: CT NAIC #: 01011 AMERICAN BANKERS INS. CO. OF FLORIDA

Payment / Refund Date: Check Number: LOC Balance: Member Balance:

Amount: Line of Credit: 0 0

Assessments Comments Line of Credit

Assessment Date	Adjustment Date	LOC Amount	Amount Paid	Status	Notification
12/28/2000	12/28/2000	16,215	16,215	16,215	16,215

Assess Details Fin Details LOC Notification Payment Refund Apply Close

Assessment Detail

FIGURE 47

1324

1325

1340a) 1340b) 1340c)

1322

1324

1325

1322c

Assessment Detail

State Fund: CT Payment / Refund Amount: 16,215

Member: AMERICAN BANKERS INS. CO. OF Payment / Refund Allocated: 16,215

Assessment Date: 12/28/2000 Total Applied: 16,215

Adjustment Date: Total Allocated: 16,215

Cash Receipt Amount: 16,215 Outstanding Balance: 0

Insolvency	Account	Assessment Amount	Pmt / Ref. Allocated	Total Allocated	Paid
IDEAL MUTUAL	Auto	-6	-6	-6	Y
IDEAL MUTUAL	Auto	-1	-1	-1	Y
IDEAL MUTUAL	Auto	6	6	6	Y
IDEAL MUTUAL	Auto	1	1	1	Y
IDEAL MUTUAL	Other	-279	-279	-279	Y
IDEAL MUTUAL	Other	-63	-63	-63	Y
TRANSIT CASUALTY	Auto	167	167	167	Y
TRANSIT CASUALTY	Auto	-137	-137	-137	Y
TRANSIT CASUALTY	Auto	-32	-32	-32	Y
TRANSIT CASUALTY	Auto	-5	-5	-5	Y

Administrative Amount: 0

Save Paid Partial/Over Gross Assessment... Cancel

FIGURE 48

Partial / Over Allocation

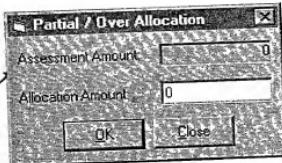


FIGURE 49

Gross Assessment

1360

FIGURE 50

Financial Detail / Payment Activity Tab

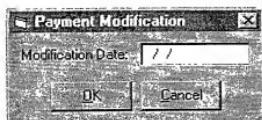
Applied Date	Check Number	Check Amount	Amount Applied	Status
01/04/1999	100753	1,573	1,573	Open

1380

1573a
1573b

FIGURE 51

Payment Modification



Financial Detail / Refund Activity Tab

FIGURE 53

1410

Applied Date	Check Number	Check Amount	Amount Applied	Status

1412

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Financial Detail / Line of Credit Activity Tab **F1(G-U)RCE** 54

Financial Detail			
State Fund	<input type="text" value="CT"/>	Cash Receipt Amount	<input type="text" value="1,573"/>
Member	<input type="text" value="COVENANT INSURANCE COMPANY"/>	Applied Amount	<input type="text" value="1,573"/>
Assessment Date	<input type="text" value="11/06/1993"/>	Allocated Amount	<input type="text" value="1,573"/>
Adjustment Date	<input type="text" value=""/>	Outstanding Balance	<input type="text" value="0"/>
Payment Activity	<input type="text" value="Refund Activity"/>	Line of Credit Activity	
Applied Date	<input type="text" value=""/>	Check Number	<input type="text" value=""/>
		Amount Applied	<input type="text" value=""/>
		Status	<input type="checkbox"/>
Assessment Date	<input type="text" value=""/>	Date	<input type="checkbox"/>
		Modif.	<input type="checkbox"/>
		Withhold	<input type="checkbox"/>
		Close	<input type="checkbox"/>

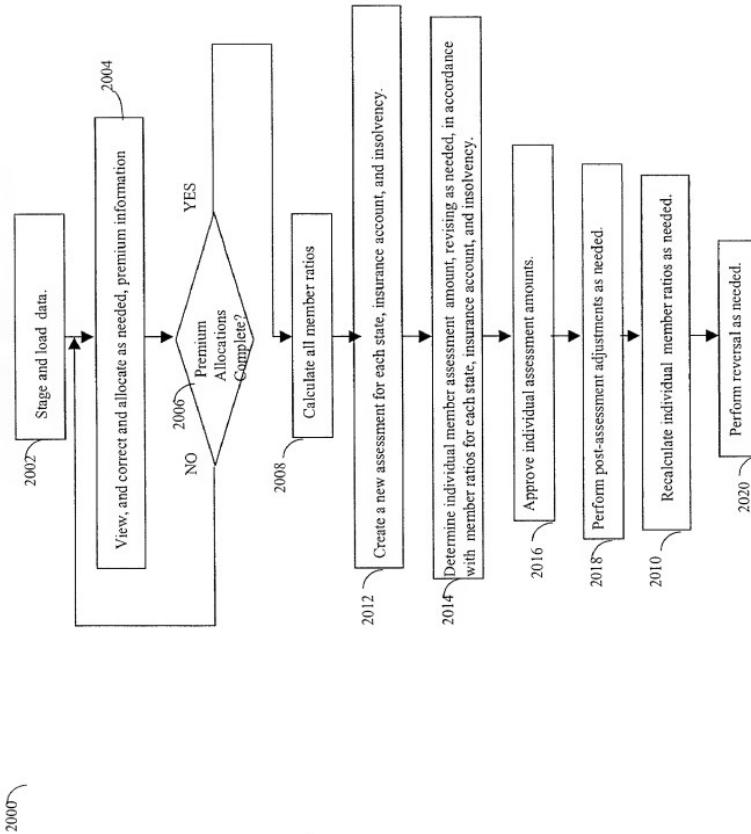
Refund Check Search

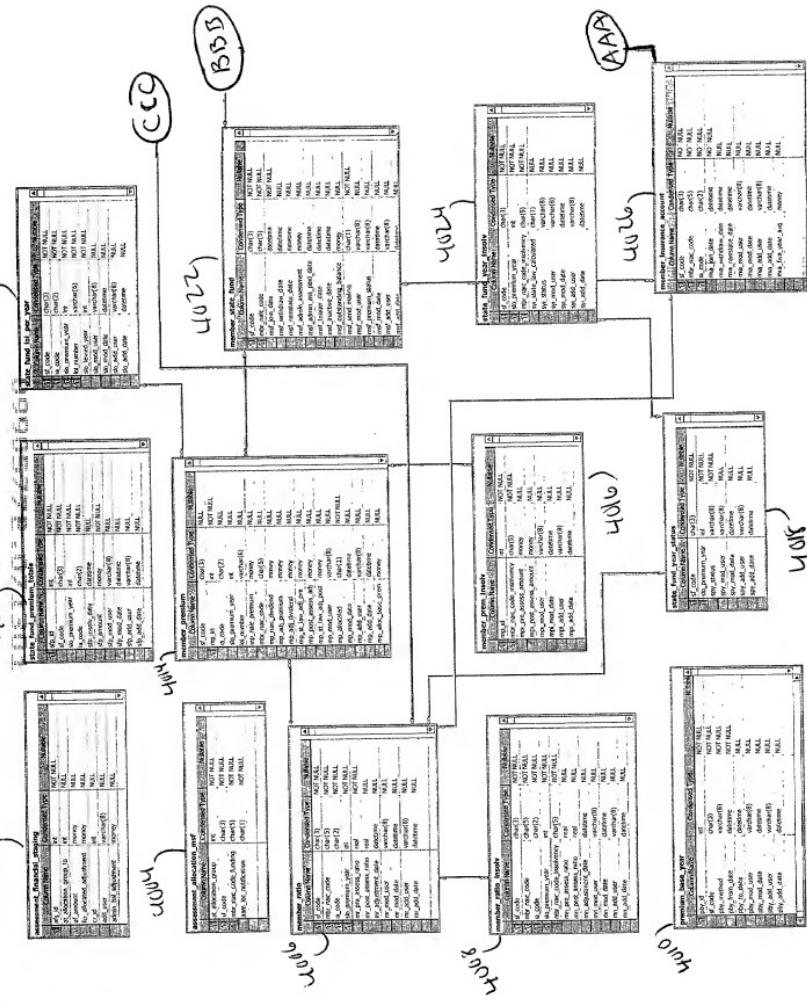
Refund Check Search							
State/Fund	CT	Check #		Date Issued	Post Date	Amount	
Paid	CT	20524	315622	05/14/2001	05/10/2001	1,656	
Paid	CT	20527	315623	05/14/2001	05/10/2001	62	
Paid	CT	20362	315527	03/07/2001	03/09/2001	51	
Paid	CT	20563	315539	03/07/2001	03/09/2001	461	
Paid	CT	12750	315476	03/29/2001	04/02/2001	1	
Paid	CT	10014	315101	12/26/2000	12/28/2000	8,988	
Paid	CT	10022	315102	12/26/2000	12/28/2000	892	
Paid	CT	10659	315103	12/26/2000	12/28/2000	7	
Paid	CT	10220	315104	12/26/2000	12/28/2000	614	
Paid	CT	10243	315105	12/26/2000	12/28/2000	7	
Search Results							
Status	State/Fund	Refund #	Issue Date	Post Date	Amount	Address	
Paid	CT	20524	315622	05/14/2001	05/10/2001	1,656	SPECIALTY NATION ATTN: FAY MAHONEY L
Paid	CT	20527	315623	05/14/2001	05/10/2001	62	AVIA FIE PROPERTY 17 STATE STREET N
Paid	CT	20362	315527	03/07/2001	03/09/2001	51	SUMMITOMO MARINE ATTN: DEBRA DUNN W
Paid	CT	20563	315539	03/07/2001	03/09/2001	461	NAC REINSURANCE SEAVIEW HOUSE S
Paid	CT	12750	315476	03/29/2001	04/02/2001	1	EXIGE INSURANCE NAIC P.O. BOX 10256
Paid	CT	10014	315101	12/26/2000	12/28/2000	8,988	AFRIKAEN FINANCIAL ATTN: R.N. FRAIT, P
Paid	CT	10022	315102	12/26/2000	12/28/2000	892	AGWAY INSURANCE ATTN: V. STASTNA D
Paid	CT	10659	315103	12/26/2000	12/28/2000	7	HOUSING AUTHORITY P.O. BOX 118 C
Paid	CT	10220	315104	12/26/2000	12/28/2000	614	AMERICAN LIFE STAFF, MICHAEL T. B.G
Paid	CT	10243	315105	12/26/2000	12/28/2000	7	NATIONAL CONTINENTAL CORP/AT&T M

Figure 55

1450

FIGURE 56





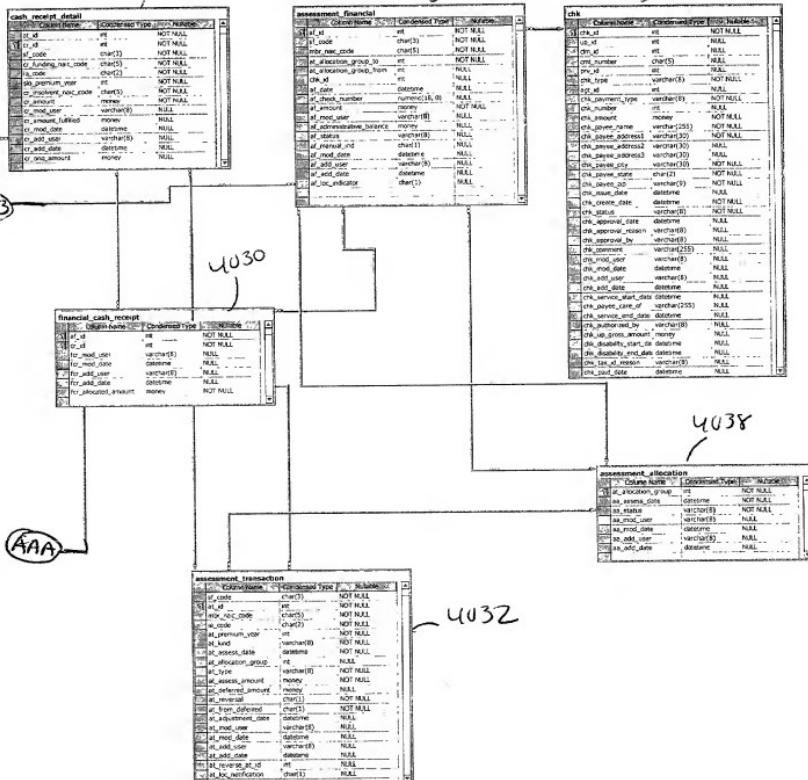


FIGURE S7B

NAIC Tables

name	native_type	Column Name	Conversion Type	Notes
rn_id	int		NOT NULL	
rl_id	int		NOT NULL	
rn_premium_year	char(4)		NOT NULL	
rn_nl_code	char(3)		NOT NULL	
rn_rec_code	char(5)		NOT NULL	
rn_ins_number	mediumtext		NOT NULL	
rn_gross_premium	money		NULL	
rn_dnload_id	money		NULL	
rn_drect_bkst_urad	money		NULL	
rn_gross_premium	money		NULL	
rn_loaded	char(1)		NULL	
rn_status	varchar(8)		NULL	
rn_mod_user	varchar(16)		NULL	
rn_mod_date	datetime		NULL	
rn_add_user	varchar(16)		NULL	
rn_add_date	datetime		NULL	

name	Column Name	Column Definition	Type	Null
ns_id	et		NOT NULL	
ns_id	et		NOT NULL	
ns_promotion_year	et		NOT NULL	
ns_promo_code	char(1)		NOT NULL	
ns_promo_code	char(1)		NOT NULL	
ns_current_surplus	money		NULL	
ns_penor_surplus	money		NULL	
ns_bounded_end	date		NULL	
ns_max_user	varchar(8)		NULL	
ns_max_date	datetime		NULL	
ns_min_user	varchar(8)		NULL	
ns_min_date	datetime		NULL	

name	ColumnName	ColumnDefinition	Type	Nullability
nmpl_member_prem	nmpl_id	int	NOT NULL	
	rl_id	int	NOT NULL	
	nmpl_premium_year	int	NOT NULL	
	nmpl_d_code	char(5)	NOT NULL	
	nmpl_premium	double	NOT NULL	
	nmpl_premium_number	varchar(5)	NOT NULL	
	nmpl_premium_m	money	NOT NULL	
	nmpl_premium_d	money	NOT NULL	
	nmpl_dividend	money	NOT NULL	
	nmpl_unpaid_prem	money	NOT NULL	
	nmpl_premium_end	date	NULL	
	nmpl_status	varchar(8)	NULL	
	nmvo_mod_user	varchar(8)	NULL	
	nmvo_mod_date	datetime	NULL	
	nmvp_add_user	varchar(8)	NULL	
	nmvp_add_date	datetime	NULL	

Column Name	Data Type	Constraint Type
rl_id	int	NOT NULL
rl_name	varchar(50)	NOT NULL
rl_code	char(3)	NOT NULL
rl_file_type	varchar(8)	NOT NULL
rl_status_date	datetime	
rl_status	bit	NOT NULL
rl_record_weight	int	NULL
rl_status	varchar(8)	NOT NULL
rl_mod_user	varchar(8)	NOT NULL
rl_mod_date	datetime	NULL
rl_add_user	varchar(8)	NULL
rl_add_date	datetime	NULL

Column Name	Constrained Type
acc_id	int
acc_id	int
mn_premium_year	int
mn_d_code	char(3)
mn_n_code	char(5)
mn_premium_rec_income	money
mn_premium_rec_income	money
mn_lowended_id	char(1)
mn_status	varchar(8)
mn_end_date	datetime

table	column_name	data_type	constraint_type	length
nd	nd_id	int	NOT NULL	
nd	nd_premium_year	int	NOT NULL	
nd	nd_next_code	char(5)	NOT NULL	
nd	nd_group_name	varchar(36)	NOT NULL	
nd	nd_firm_box	char(1)	NULL	
nd	nd_community_type	char(1)	NULL	
nd	nd_firm	char(11)	NULL	
nd	nd_state_domestic	char(2)	NULL	
nd	nd_address	varchar(40)	NULL	
nd	nd_zip	varchar(10)	NULL	
nd	nd_state	char(2)	NULL	
nd	nd_zip	varchar(10)	NULL	
nd	nd_contact_person	varchar(30)	NULL	
nd	nd_contact_phone	varchar(30)	NULL	
nd	nd_contact_email	varchar(30)	NULL	
nd	nd_crmg_b_d_date	varchar(10)	NULL	
nd	nd_group_code	char(3)	NULL	
nd	nd_group_name	varchar(50)	NULL	
nd	nd_community_status	char(1)	NULL	
nd	nd_is_deleted	char(1)	NULL	
nd	nd_booking_nd	char(11)	NULL	
nd	nd_status	varchar(8)	NULL	
nd	nd_mod_user	varchar(8)	NULL	
nd	nd_mod_date	datetime	NULL	
nd	nd_add_user	varchar(8)	NULL	
nd	nd_country	varchar(25)	NULL	

100-250-000-225000

2500

■ Premium Summary

State Field: N.C. Year: 1996 Inventory Date: 11/15/1995 Member Info: NAC #: End Status: Standard Member Points

Premium Subtotals

Member	NAC #	All	Auto	Other	Workers' Comp	Total	(Net) *
RELIANCE INSURANCE	10019		0	851,140	0	0	0
AGWAY INSURANCE CO.	10022		508,553	0	0	1,355,932	
AMERICAN BANKERS INS.	10111		105,184	520,965	0	634,179	
AMERICAN LIFE STOCKS	10220		0	3,106	0	3,208	
WHITE MOUNTAIN INS.	10205		25,355	79,105	0	113,110	
AMERICAN INSURANCE	10227		0	0	0	0	
NATIONAL CONTINENTAL	-10243			0	0	0	
NUDEL INSURANCE CO.	10346			20,985	0	156,191	
AVENCO INSURANCE CO.	10387			42,257	0	42,257	
CANAL INSURANCE CO.	10464			2,856,727	0	2,856,727	
CHRYSLER INSURANCE	10439			90,389	0	234,116	
CAROLINA CASUALTY INS.	10510			118,887	0	118,887	
PROSELECT INSURANCE	10538			49,135	0	53,291	
CHURCH INSURANCE CO.	10659			0	0	0	
CINCINNATI INSURANCE	10777			25,113	0	25,213	
NATIONWIDE INSURANCE	10723			3275	50,403	53,278	
				0	0	0	

Premium Detail Add Premium Print Premium Details Date Colored Style Low

2001 2002

Figure 59

2705

2708b NAIC#: 19550
2708a State Fund Code: VA
2702 Insurance Account: Other
2702 Withdrawal Date: 03/09/1989
2704 Reinstated Date: 11
2704 5-Year Average: 45.865

FIGURE 61

1025400-0742750660